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PR No. 1-60

INFORMATIONAL MEMORANDUM

January 7, 1960

Subject: Regular Review of Recent News and Editorial  
Comment

Recent major press treatment of tobacco and health includes  
the following subjects:

1. The editorial in the December Journal  
of the American Medical Association.
2. Surgeon General Burney's article on  
smoking and lung cancer. (See PR No. 79-59,  
December 4, 1959, previously distributed.)
3. Dr. Oscar Auerbach's paper at the American  
Medical Association's clinical meeting in  
Dallas, Texas.
4. An anti-tobacco resolution and several  
anti-tobacco papers at the meeting of the  
American Public Health Association in  
Atlantic City.
5. A statement on lung cancer issued by the  
American College of Chest Physicians at  
its meeting in Albuquerque, N.M.

Press attention also was given the year-end statement by  
Mr. Richards and news releases issued on the latest issue of  
Tobacco News.

Most items in this summary have previously been covered in the  
Tobacco News Summary.

Hill and Knowlton, Inc.  
Public Relations Counsel  
150 East 42nd Street  
New York 17, New York

attachment

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NEWSWEEK

December 21, 1959

## CIGARETTES

### Do They—Or Don't They?

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Three weeks later, in an editorial in the Dec. 12 issue of The Journal, its new editor, Dr. John H. Talbott, sharply questioned the accuracy of Dr. Burney's conclusions: "Although the studies [cited by Burney] reveal a relationship between cigarette smoking and cancer that seems more than coincidental, they do not ex-

plain why, even when smoking patterns are the same, case rates are higher among men than women, and among urban than rural populations. Neither the proponents nor the opponents of the smoking theory have sufficient evidence to warrant the assumption of an all-or-none authoritative position. Until definitive studies are forthcoming, the physician can fulfill his responsibility by watching the situation closely, keeping court of the facts, and advising his patients on the basis of his appraisal of those facts. The Public Health Service can best meet its obligations by collecting and disseminating data from all sources, and making known to the health and medical professions its own evaluations of such data."

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born, Harvard-trained internal-medicine specialist, who for the past twelve years had edited the highly respected scientific quarterly, *Medicine*. He was a member of the editorial board that evaluated and accepted the Burney article. The Burney piece seemed based on statistics in a New York State Department of Health publication on the same subject," he said. "The Surgeon General simply re-presented the same data."

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The comment of the Journal summarizes the present status of the matter:

"A number of authorities who have examined the same evidence cited by Dr. Burney do not agree with his conclusions. Although the studies reveal a relationship between cigarette smoking and cancer that seems more than coincidental, they do not explain why, even when smoking patterns are the same, case rates are higher among men than among women and among urban than among rural populations."

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As this newspaper pointed out in commenting on the Burney article, not enough yet is known of the causes of cancer to fix the blame on any particular factor. Researchers have several leads, which need to be pursued before cigarette smoking, any more than industrial smog and fumes from motor vehicles, should be described as responsible for the increase in lung cancer. And in the last few days, Secretary of Health, Education and Welfare Arthur Flemming has called attention to the fact that a synthetic hormone used to treat chickens and other animals whose meat is used for food has produced cancer experimentally.

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Perhaps a statistical study should be made of the attitudes and personality patterns of the researchers. Those who work for the tobacco companies are immediately suspects; they at least hope that their investi-

gations will not uncover something their employers would not like.

But what about the independent researchers? Are they gathering evidence to support their opinions?

The whole matter is suspect because age-old puritanical objections to smoking still influence people's thinking. From the first introduction of tobacco into Europe there were those who claimed it did all sorts of frightful things to people. And, on the other hand, there have always been those who praised smoke extravagantly.

More intellectual honesty in this matter would be appropriate.

BEACON

Wichita, Kansas

December 12, 1959

BEE

Danville, Virginia

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### A Break For Tobacco

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It is by no means certain that this defense of the industry will silence those who continually are sniping at tobacco and repeating the old threadbare charges.

It is doubtful if the public is convinced that what Dr. Burney said is true, for not only is the consumption of cigarettes steadily increasing, but the country is being made conscious of other factors in the cancer situation.

Only this week the issue of dangerous additives was broached once more with the assertion that certain chemicals used to fatten hens artificially promotes the development of malignancy. In the same breath there has been a suspicion brought forward before a Senate investigating committee that some of the new medicines have elements in them which produce an adverse reaction to the patient. There is also the rising fear that the pollution of the air by monoxide fumes and other emanations from internal combustion engines, are setting up irritations in the human respiratory system which gradually develop into malignant growths.

People are even beginning to wonder if the Pure Food and Drug Act is being applied to the maximum benefit of the public since it has been said that the rate of development in additives, preservatives and colorants applied to food is faster than the staff of chemists can make their determining experiments.

So many new factors have sprung up in relation to cancer and its cause that tobacco cannot any longer be singled out for this indictment. But the psychological damage done is considerable in terms of the tobacco industry. If some medical group were to give an opinion that the colorant that is added to oranges is detrimental to health there would be a loud cry from the orange groves just as the cranberry bogs up north have been heard from over the poison scare.

NEWS & OBSERVER

Raleigh, North Carolina

December 14, 1959

## AMA Neutral On Lung Cancer

Through its publication, *The Journal*, the American Medical Association has now taken a neutral position in the controversy as to whether or not cigarette-smoking has been proven to be the main factor in the recent increase in reported cases of lung cancer.

*The Journal* has now properly repudiated the views of Dr. Leroy E. Burney, chief of the U. S. Public Service, which appeared in its own columns last month. Dr. Burney made the flat statement that smoking is the "main factor" in the increase although conceding that there are "unanswered questions" which he brushed aside.

These questions rise from the fact that the evidence shows that more cases have been reported among men than women where both groups had the same smoking habits; and that men smokers who live in cities have had more lung cancer than rural residents who smoke just

as many cigarettes. *The Journal* does conclude, however, that pertinent statistics "reveal a connection between cigarette-smoking and cancer that seems more than coincidental."

After considering all the evidence, *The Journal* makes this wise summary: "Neither the proponents nor the opponents of the smoking theory have sufficient evidence to warrant the assumption of an all-or-none authoritative position."

Both the U. S. Public Health Service and private physicians would do well to follow the advice of the AMA to await "definitive studies" before taking a dogmatic position for or against the smoking theory as related to cancer.

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After considering all the evidence, *The Journal* makes this wise summary: "Neither the proponents nor the opponents of the smoking theory have sufficient evidence to warrant the assumption of an all-or-none authoritative position."

Both the U. S. Public Health Service and private physicians would do well to follow the advice of the AMA to await "definitive studies" before taking a dogmatic position for or against the smoking theory as related to cancer.

Certainly opinions on the subject should not be proclaimed as proven facts. Those who prefer facts to opinions should emulate the AMA by reserving judgment until actual proof is available.

Radio Reports, Inc.

Quincy Howe, substituting for John W. Vandercook, December 10, 1959  
at 10:00 PM over WABC (N.Y.) and ABC Network:

HOWE: The Journal of the American Medical Association has taken issue with Doctor Leroy E. Burney, Surgeon General of the United States.

"Two weeks ago the Journal carried the report of Doctor Burney describing smoking, especially cigarette smoking, as the main factor in the recent increase of lung cancer.

"The Journal of the American Medical Association now reports that there is not enough evidence to warrant this assumption."

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## On Cigaretts, Cancer, People

Closing the cover on our lighter and inhaling deeply from a newly lighted cigaret, we now set hands to typewriter to comment on the latest pronouncement concerning cigaretts and cancer.

Surgeon General Leroy E. Burney announced this week that the preponderance of evidence points to cigaretts as the chief cause of the alarming rise in lung cancer among Americans.

The tobacco industry, in quick retort, says that the facts don't support Burney's contention, that other factors were ignored by the Federal official in arriving at his conclusions.

We won't attempt to judge this situation here. Burney's announcement did seem to lack supporting evidence that was solid. On the other hand, the tobacco industry's experts have a selfish purpose to serve and their views must be weighed in that light.

The point that strikes us is that such pronouncements are unlikely to have any appreciable effect on smoking habits of Americans over any extended period. Mass warnings are difficult to relate to individual behavior, so until one's own physician tells a person to stop, he's likely to ignore such statements as Burney's. And, since more doctors smoke than not, who are they to tell us not to do the same?

On this inconclusive note, we'll move on to another subject, having snuffed out the butt of our cigaret and reached for another

COURIER-JOURNAL  
Louisville, Kentucky  
November 29, 1959

## The Cranberry Bog And Cigarette Fog

APPLE SAUCE accompanied the Thanksgiving turkey at the White House, but cranberries held their accustomed place at Vice President Nixon's house. Thus the citizen who looks to the Administration for guidance in health matters was left in some confusion—a confusion further confounded by the fact that the public Health Service chose the same holiday for a renewal of its attack on cigarettes.

The effect was simply a renewal of the debate between those on the one hand, including the Public Health Service's chief, Surgeon General BURNLEY, who relate cigarettes to lung cancer, and those on the other hand who insist that no relation has been proved. The tobacco industry, including both the manufacturers and growers, reacted with predictable vigor to Dr. BURNLEY's argument, which had the implicit support of Secretary FLEMMING of the Department of Health, Education and Welfare. It was Mr. FLEMMING who set off the cranberry crisis.

Smokers are more devoted to tobacco, even when inhaled through filter tips (which, incidentally, Dr. BURNLEY says are of little or no avail), than anybody is to cranberries. Who ever heard of a cranberry addict? Thus a cigarette crisis, comparable to the cranberry crisis, is unlikely, and we imagine that the housewife who shrank from cranberries in the supermarket will, if she smokes, patronize the cigarette shelves as always.

Scientific evidence is adduced on both sides of the cigarette argument, and the layman feels unqualified to participate. Its present renewal sounds to him like another installment of an old serial, enlivened this time by Representative WARREN of Kentucky, whose district is a heavy producer of fine burley. "Perhaps," said Mr. WARREN, "Secretary FLEMMING has had his subordinates throw up a smokescreen to hide the fact that he is still stuck in the cranberry bog." Meanwhile, the smoker, lost in a fog of conflicting claims and statistics, soothes his nerves in the usual way.

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FIRST, there was Arthur S. Flemming, the Secretary of Health, Education and Welfare, to sour Thanksgiving with derogatory remarks about cranberries.

Now, the Surgeon General of the U. S., Dr. Leroy E. Burney, takes out after cigaretts with what is the strongest language that the Government has yet used in linking them to cancer. "The weight of evidence, at present," says Dr. Burney, "implicates smoking as the principal etiological [causative] factor in the increased incidence of lung cancer... Cigaret smoking particularly is associated with an increased chance of developing lung cancer." And Dr. Burney also claims: "No method of treating tobacco or filtering the smoke has been demonstrated to be effective in materially reducing or eliminating the hazard of lung cancer."

Furthermore, Secretary Flemming, not satisfied with his cranberry stew, has spoken unkind words lately about misleading toothpaste ads.

As we sip our cranberry juice, puff the weed through a filter tip, and smile in the certainty that our toothpaste is fighting decay all day, we wonder what things are coming to in Washington. Next they'll be telling us that a pen can't write through butter.

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RECORD

Troy, New York  
November 30, 1959

GAZETTE

Sterling, Illinois  
December 10, 1959

**Whether Cigarette Smoking-Cancer Have Relation,  
Is A Matter Attracting Attention Of This Nation!**

The situation seems to be: While the United States government has full legal authority to keep you from possibly catching cancer through cranberries poisoned by weed-killers, it has no such authority to keep you from possibly catching lung cancer through smoking cigarettes.

What's more, nobody now has any notion of trying to get a law passed which would try to make people stop smoking.

The legal difference between a cranberry and a cigarette — in case your children aren't able to figure this out for you — is that cranberries are food and cigarettes aren't.

★ ★ ★

The law gives U. S. Food and Drug Administration full authority to protect the public from contaminated foods, drugs and cosmetics. Cigarettes can't be classed as cosmetics, even though some people wear them and women put lipstick on 'em. The use of contaminated lipstick can be prevented, but not cigarettes.

So FDA Commissioner George P. Larrick had the law on his side when he moved in to protect you from cranberry cancer. He can't do a thing to protect you from cigarette cancer.

This background explains the statement by Dr. Leroy E. Burney, surgeon general of the U. S. Public Health Service, warning that cigarette smoking is the principal causative factor in the increased incidence of lung cancer.

He was using his legal authority to disseminate information on a matter pertaining to safeguarding the public health. That's all he can do in this case.

Public Health Service has no legal authority to stop people from smoking even if it could prove that more people would get lung cancer from tobacco than would get other kinds of cancer from eating contaminated cranberries.

Some thought has been given to the idea of passing a law to classify tobacco as a food and bring it under the Food and Drug Act. But this gimmick might not stand up.

★ ★ ★

Tobacco Manufacturers sometimes tangle with the law when they introduce brands of cigarettes for which they claim medicinal use. If claims are made that a certain cigarette will cure or prevent a disease like bronchitis, it can be classed as a drug and brought under the Food and Drug Act.

There's a case pending now against a cigarette for which the claim was made that it would help in reducing weight.

Most such cases end in false advertising complaints before the Federal Trade Commission. Unethical manufacturers stay out of the clutches of Food and Drug Administration by making their claims in advertising, but not repeating them on the label of the package itself.

If the label doesn't give directions for achieving the benefits claimed in the advertising, however, misbranding charges can be brought against the manufacturer in a squeeze play.

A still untested course of action being considered is based on the assumption that the filters in cigarettes are medical devices to preventing poisoning by the tars in tobacco smoke. Medical devices come under Food and Drug law.

★ ★ ★

Surgeon General Burney now declares, however, that no method of filtering the smoke or treating tobacco has proved effective in reducing the hazard of lung cancer.

There are other legal blocks. Public Health Service has full authority to prevent the spread of communicable diseases. The general welfare and interstate commerce clauses of the Constitution also apply. But nobody has yet proved that cancer is a communicable disease.

Neither has anyone proved that tobacco smoke causes cancer. The extracted tars of tobacco have induced cancer in laboratory mice. But the tobacco people argue that these tars are so weak in ordinary smoke that the risk is minimized.

They also argue that there's a lot more danger of injury or death in an automobile accident, crossing the street or going to and from work. And nobody wants a law to stop these activities.

**Cigarettes And Cancer**

That old bogeyman of the cigarette smoker—cancer scare—appears on the horizon again. Out for the title of the most unpopular man of the month among the cigarette manufacturers, Dr. Leroy E. Burney, surgeon general, has some grim pronouncements to make regarding the relationship of cigarette smoking and cancer of the lung.

Dr. Burney, who smokes only cigar and pipe himself, stands firm against dissenters. He said flatly that the "weight of evidence" indicts smoking as the principal factor in the growing increase in lung cancer and that cigarette smoking is "particularly associated" with the increase. He is not timid in giving counsel. He insists that neither the use of filters nor the treatment of tobacco reduces the hazard and warns that the best insurance against cancer of the lung is to stop smoking.

The Surgeon General's condemnation appears in an article written for the Journal of the American Medical Association. This is probably the farthest the official and the United States agency have gone in pointing up the dangers from smoking.

His article cites a study which shows "that a person who smokes cigarettes has almost three times the risk of dying from lung cancer as the pipe smoker, and seven times that of the cigar smoker." The Surgeon General's points are gloomy ones and are calculated to leave the habitual cigarette smoker somewhat shaken.

Meanwhile the cigarette tradesmen are not taking this blow lying down. James P. Richards, president of the Tobacco Institute, declares that Burney's findings are a lot of nonsense. He also can recite chapter and verse where the Burney forebodings are in error. He finds among other things that "people described as the world's heaviest cigarette smokers have low lung cancer death rates compared with people who smoke less but have been long exposed to urban air pollution."

We have decided to wait until the noise has quieted down before making our own decision. We had qualms about cranberries two weeks ago. But we ate cranberries on Thanksgiving — in our private poll we found 9 out of 10 families did also.

Now stories are coming out of Washington about the danger of using lipstick. Another fight for the Public Health Service is shaping up regarding the eating of jelly beans.

The best solution is to go off by yourself and debate the pros and cons of all these matters. They are among the many little decisions in life that you have to make for yourself. Life is a great hazard, after all. The element of chance is tremendous. We wager that confirmed cigarette smokers may reduce the intake slightly, but will keep right on smoking the weed.

1003543499

1003543499

COMMERCIAL  
Pine Bluff, Arkansas  
December 8, 1959

POST  
Bridgeport, Connecticut  
December 1, 1959

### Nation Smokes Despite Warning

The controversial issue over the reported incidence of lung cancer and cigarette smoking erupted again last week when U.S. Surgeon General Leroy E. Burney said the weight of evidence implicated smoking as the main cause of the disease.

Based partly on new evidence, it was the Public Health Service's strongest statement yet issued on the subject. The Surgeon General went even further, declaring that no method of treating tobacco or filtering smoke has been shown to be effective "in reducing or eliminating the hazard of lung cancer."

The Public Health head was attacked immediately by the tobacco industry, its scientific director, and others. Dr. Burney's points are not supported by experimental evidence, they declared, and called his statistics "flimsy evidence."

Tobacco shares slumped on the New York Stock Exchange, but there is new evidence to indicate the slump will be short-lived. The Internal Revenue Service, which collects the federal tax on cigarettes, revealed cigarette consumption figures for

September, showing shipments of more than 39 billion cigarettes in the month, a billion more than in September, 1958. Total production was up 3.3 per cent, to 42.7 billion units.

The Agriculture Department expects 485 billion cigarettes will be produced this year, a 3 per cent gain above 1958, with even greater production forecast for 1960 because of increased population and a rise in the number of women smokers.

It is obvious that if there has been a decline in cigarette smoking by persons who fear lung cancer, the number giving up the weed is so small it can hardly be measured.

Figures from the Internal Revenue Service are cold statistics, having nothing to do with the health controversy. They are a clear indication that in spite of certain medical statistics, and all sorts of warnings, the American people are not convinced that there is much if any danger in smoking.

Research will and must go on until one side or the other can produce proof beyond any reasonable doubt that cigarette smoking is or is not harmful. Neither group has been able to accomplish that yet, but if the tremendous rise in production is an indication of the public mind, it is plain that it is on the side of the producers.

### They Speak too Soon

The recent blast of the Public Health Service on "Smoking and Lung Cancer" gives us official assurance that if we don't smoke and get lung cancer anyway—it won't be from smoking.

This is about as far as anyone can go in the light of present knowledge, yet, in the effort to make tobacco appear the culprit, this Government report drags out tired old statistics that were presented to the public years ago, yet admits that experimental evidence does not support the theory of smoking as a cause of lung cancer.

The Public Health review also admits that we still don't know the effects of air pollution and occupational exposures and that the tobacco theory does not explain differences in lung cancer incidence rates.

Dr. C. C. Little, scientific director of the Tobacco Industry Research Committee, and who has spent 50 years in cancer research, notes that the report gives little or no attention to new evidence of recent months that:

"1. Finds that people described as the world's heaviest cigarette smokers have low lung cancer death rates compared with people who smoke less but have been long exposed to urban air pollution.

"2. Shows that direct inhalation of tobacco smoke by laboratory animals over long periods of time has not resulted in causing lung cancer in these animals.

"3. Reveals that human lung tissues undergo changes, considered suspicious by some, that are found among both young and old, non-smokers and smokers, while lung tissues 'may be perfectly normal in heavy smokers'.

"4. Confirms the long-established but little-publicized fact that lung cancer occurs more frequently in people who have a medical history of previous serious lung ailments, such as tuberculosis, pneumonia and influenza, indicating a relationship of possible significance."

It will be recalled that the commotion over lung cancer and smoking arose with the discovery that laboratory animals developed skin cancer after being painted with tobacco "tars". Certainly, the failure of smoke inhalation tests is more significant in view of the fact that people smoke tobacco rather than using it as a cosmetic.

All in all, the Public Health review may be criticized for undue reliance on the published opinions of those who have been long committed to the theory that smoking is the principal cause of lung cancer.

On balance, most thoughtful people, we believe, will go along with Dr. Little's summation that "we are only at the threshold of understanding the breadth and depth of the lung cancer problem".

(This editorial was distributed by U.S. Press Association and has been seen in many newspapers.)

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1003543501

THE CHRISTIAN  
SCIENCE MONITOR  
Boston, Massachusetts  
December 11, 1959

## AMA Questions Smoking Danger

By the Associated Press

Chicago  
The Journal of the American Medical Association said Dec. 10 that there is insufficient evidence "to warrant the assumption" that cigarette smoking is the principal factor in the increase in lung cancer.

In an editorial the journal questions conclusions in a report by Dr. Leroy E. Burney, surgeon general of the United States Public Health Service, listing smoking as the main factor leading to such an increase and concluding that heavy smokers are more prone to lung cancer than others.

Dr. Burney's report, summarizing research on lung cancer, was carried two weeks ago in the journal.

The journal editorial recalled that Dr. Burney's report identified the Public Health Service with those who consider that the evidence to date implicates smoking as the principal factor in the increase in lung cancer, the editorial continues:

"A number of authorities who have examined the same evidence cited by Dr. Burney do not agree with his conclusions. Although the studies reveal a relationship between cigarette smoking and cancer that seems more than coincidental, they do not explain why, even when smoking patterns are the same, case rates are higher among men than among women and among urban than among rural populations."

"The Public Health Service can best meet its obligations by collecting and disseminating data for all sources and making known to the health and medical professions its own evaluations of such data."

NEW YORK DAILY NEWS  
New York, New York  
December 12, 1959

## MAKE UP YOUR MINDS, BOYS

Surgeon General L. E. Burney of the U. S. Public Health Service says it is now established that cigaret smoking causes lung cancer. The American Medical Association Journal says Burney is all wet, and nobody can yet state authoritatively whether cigarets do or don't bring on this dread disease.

Until the scientists make up their minds one way or the other, we don't see why Americans shouldn't go on calmly smoking as many cigarets as they damn please—which is just what current figures on booming cigaret sales show Americans to be doing.

NEW YORK  
WORLD-TELEGRAM & SUN  
December 11, 1959  
New York, New York

## AMA Warns Doctors About Cigaret Data

Reference Service

CHICAGO, Dec. 11.—Doctors were cautioned today that data on lung cancer and smoking recently compiled by the United States Health Service are not enough to indict the cigaret as a cause of lung cancer.

An editorial in the Journal of the American Medical Assn. states that the summary of information on research in the smoking-lung cancer controversy, written by Surgeon General Leroy E. Burney, identifies the Public Health Service with those who consider the evidence proof enough that smoking is the principal causative factor in the increase in lung cancer.

A number of authorities who have examined the same evidence, the editorial cautions, do not agree with Dr. Burney's conclusions.

Neither the proponents nor the opponents of the smoking theory have sufficient evidence to warrant the assumption of an all-or-none authoritative position, the AMA editorial said.

This editorial closely follows Dr. Burney's report in the Journal. He stated that evidence implicates smoking as the principal causative factor in the increase in lung cancer.

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CHICAGO DAILY NEWS  
Chicago, Illinois  
December 11, 1959

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NEW YORK  
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U.S. NEWS AND WORLD REPORT  
December 21, 1959

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THE MIAMI HERALD  
(front page)  
Miami, Florida  
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ADVERTISER  
Montgomery, Alabama  
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Dr. Flemming's  
Self-Assurance

SECRETARY Flemming and the Food & Drug Administration seem suddenly to have acquired a knack for spotting cancer-causing agents in popular consumer items.

First it was cranberries; a day or so ago, it was chickens.

Nobody would deny the Secretary the right and duty to inform the public of hazardous foods and drugs detected in the government's laboratories. Just the opposite, in fact; he should be inhibited in no way, no even by the fear of widespread economic loss.

But the manner in which Flemming wiped out the 1959 cranberry crop and put a cloud on the chicken and broiler industry makes his actions seem impetuous and even calculated. His announcements, as they reach the public, are unqualified conclusions offered in the simplest terms: X chemical fed to Y animal produces cancer.

In the cranberry blast, Flemming did not mention—nor ever deny to our knowledge—the cranberry industry's estimate that a person would have to consume something like 15,000 pounds of berries a day to be harmed by the chemical Flemming said was cancer-causing.

How many chickens fed with stilbestrol would have to be eaten to cause harm?

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Additional press comments of Dr. Burney's recent article in the  
Journal of the American Medical Association. (Other press comments  
included in PR No. 79-59, December 4, 1959.)

BLADE

Toledo, Ohio

November 30, 1959

## A Burning Issue?

**M**ORE FUEL has been added to the smoldering debate over health and smoking by U.S. Surgeon General Leroy E. Burney, but it is doubtful that his statements implicating tobacco as a cause of lung cancer will stir up a controversy matching the Great Cranberry Flasco.

Although Dr. Burney, in an article in the Journal of the American Medical Association, is careful to cite 81 scientific experiments supporting U.S. Public Health Service conclusions linking smoking to the growing lung cancer rate, his report is merely another chapter in the long debate. The basic question of tobacco's role as a causative factor in lung cancer has still not been determined categorically—although Dr. Burney's remarks are the most positive made yet by a government agency on the subject.

The smoke had no sooner settled from Dr. Burney's revelations than Dr. C. C. Little, scientific director of the tobacco industry research committee, whose interests might be considered more biased than those of the Surgeon General, spoke out in disagreement. He described Dr. Burney's findings as a rehash of old statistics, and went on to suggest that other new experiments in the field tend to support the tobacco industry's claim that evidence on the matter is contradictory.

Meanwhile, as this debate among the men of science goes on, what about the millions and millions of Americans who are apparently wedded to the habit of smoking?

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Closer to home, the Ohio sales tax department noted just last week that Ohioans are buying cigarettes now at the record rate of 100 million packs a month.

Either we Americans—including the thinking men among us—are unperturbed by whatever evidence has been introduced so far linking smoking to lung cancer, or the smoking habit is so firmly imbedded in our mores that we are determined to cling to it come what may. Or perhaps there is a general inclination to view the whole dispute with some degree of fatalism.

After all, Dr. Burney also pointed out in his article that air pollution is another probable—although lesser—cause of lung cancer. And no one has suggested yet that Americans stop breathing.

NEWS

Hutchinson, Kansas

November 28, 1959

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The surgeon general does not stop with that. He declares that air pollution, chiefly industrial smog and auto exhaust, is a probable though a lesser cause of lung cancer.

The evidence is not yet conclusive, but there now is too much of it to be dismissed. Prudently we should give up cigarettes, automobiles, and industrial cities, along with cranberries, lipsticks, quiz programs, and disc jockeys.

In so doing we all will live to such a ripe old age that the problem of our care in our senile years will be as formidable a one as that posed by the increase in lung cancer.

REGISTER

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"There's no use getting into something so controversial if you don't have to," Dr. Zimmerer said.

Dr. Zimmerer said he did not take any exceptions to Dr. Burney's statements on the link between cigarettes and lung cancer. But the link is "not certain," he said "and it's so controversial that we'll let him carry the ball."

"People can use their own judgment, to smoke or not to smoke. Anything we'd say probably wouldn't have much influence anyway."

The health department's vital statistics division reported lung cancer as the cause of 345 Iowa deaths in 1955; 379 in 1956; 475 in 1957 and 428 in 1958.

Additional press comments of Dr. Burney's recent article in the  
Journal of the American Medical Association. (Other press comments  
included in PR No. 79-59, December 4, 1959.)

BLADE

Toledo, Ohio

November 30, 1959

## A Burning Issue?

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Although Dr. Burney, in an article in the Journal of the American Medical Association, is careful to cite 81 scientific experiments supporting U.S. Public Health Service conclusions linking smoking to the growing lung cancer rate, his report is merely another chapter in the long debate. The basic question of tobacco's role as a causative factor in lung cancer has still not been determined categorically—although Dr. Burney's remarks are the most positive made yet by a government agency on the subject.

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## What Caused Rash Of Cancer Scares?

We didn't hear much yelping from Tar Heels when Health, Education and Welfare Secretary Arthur S. Flemming tossed his pre-Thanksgiving cranberry scare at the nation — possibly because cranberries are a more or less minor crop in North Carolina.

But the blast by Surgeon Gen. Leroy E. Burney against cigarettes as the main cause of lung cancer is quite another story. Tobacco is North Carolina's big crop.

We don't know how many persons were affected by the cranberry scare, but there are approximately 58 million smokers in the United States. We doubt if many of them will give up cigarettes in time for Christmas solely on the Surgeon General's warning.

Carl T. Hicks, a farmer and president of the Tobacco Growers Information Committee in Carolina has launched a strong counter-attack. He charges that Burney's conclusions as written in the Journal of the American Medical Assoc., are based on "the same old worn-out statistical studies" that have never proved conclusively that cigarettes have any direct connection with lung cancer.

Of course, the Surgeon General admitted that there are other factors which contribute to the cause — such as air pollution. The major sources of air pollution are exhaust products of gasoline and diesel engines — a point we made in a recent editorial.

Burney further admitted that the lung cancer incident is higher in urban areas than in rural areas where air pollution is considerably less.

We don't doubt for one moment that there are a awful lot of cigarette smokers among the tobacco farmers and their families in North Carolina. Yet we don't recall that the incident of lung cancer is particularly high among them.

We are certainly all for cancer research. We hope that one day this dread disease will be stamped out entirely, or at least brought to the point where it can be controlled.

But until the experts have definite proof as to what actually causes lung cancer, we think they would do well to get off the publicity train.

STAR  
Wilmington, North Carolina  
November 28, 1959

TIMES-DEMOCRAT  
Pryor, Oklahoma  
November 28, 1959

### Mixed Reception

Whatever else can be said for the federal government, it keeps life from getting dull.

The controversy over cranberries had not grown cold before the surgeon general of the United States was out with a warning of growing evidence which he says links smoking with lung cancer.

The reaction was immediate. The tobacco industry, as might be expected, set up a long loud howl. Tobacco shares on Wall Street were off several points. The smokers are yet to be heard from.

The tobacco-cancer case is nothing new. Quite the contrary. It is several years old and the surgeon general appears to have presented little new in the way of statistical information except to state his beliefs in stronger terms.

The government has a responsibility to warn citizens of anything which might affect the public health. It also has a responsibility to be direct and conclusive in its warnings and certainly it has the facilities to prove its points before reaching for the panic button.

Whether it's cranberries or cigarets, it appears the government has been something less than conclusive and is not too certain at times of its own findings. Until it is, there will be a mixed reception for them and more than lingering doubt in the minds of many.

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TRIBUNE  
Scranton, Pennsylvania  
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The revival is spurred by announced findings of Dr. Leroy E. Burney, Surgeon General of the Public Health Service. Writing in the Journal of the American Medical Association, Dr. Burney declared that the weight of evidence at present implicates smoking as the principal cause of the increased incidence of lung cancer. And he said, further, that filter tips have not been found effective in "materially reducing or eliminating the hazard of lung cancer."

Immediately upon the release of Dr. Burney's views there came protests and denials from organizations affiliated with the tobacco industry.

James P. Richards, president of the Tobacco Institute, termed the Burney findings to be "extreme and unwarranted conclusions." He charged the doctor with ignoring the balanced evidence reviewed in his own scientific paper and "summar-

izing his opinions with so little regard for that evidence, he has performed a real disservice . . ."

And Dr. C. C. Little, scientific director of the Tobacco Industry Research Committee, which makes grants for independent medical research, said:

"Today, more than ever before, scientific evidence is accumulating that conflicts with or fails to support the tobacco smoking theories of lung cancer. Many of these have been omitted from or glossed over in the Public Health Service article and press release."

Dr. Little, among other things, pointed out that new evidence finds that people described as the world's heaviest cigarette smokers have low lung cancer death rates compared with people who smoke less but have been long exposed to urban air pollution.

If these conflicting views are confusing to the average layman he need not fret too much over that fact for they are equally confusing to the average medical man, too.

## Here We Go Again

ENQUIRER-NEWS  
Battle Creek, Michigan  
November 30, 1959

## Another Government 'Scare'

Another segment of American industry is in an uproar over a government agency's warning against its product—this time, cigarettes. In light of "proof" offered by the U. S. Surgeon General, Leroy E. Burney, the tobacco companies seem to be well justified in their complaints.

Burney uses rather vague terms to support his suggestion that "unless the use of tobacco can be made safe, the individual's risk of lung cancer can be reduced best" by giving up smoking. This warning is based on Burney's statement that "evidence implicates" smoking as the "principal" cause of the nation's increase in lung cancer.

As a result of Burney's warning, tobacco company stocks took a beating in the market last Friday. The companies have attacked the surgeon general's claims and, in general, another "cranberry crisis" has been precipitated.

In effect, Burney has added nothing new to warnings from doctors and research laboratories. The possibility that smoking may cause lung cancer has been expounded for years. But, the surgeon general has spoken for government in the matter, lending great weight to the reports of private medical research.

The head of the U.S. Public Health Service may be correct in his statements. We are not taking issue on that score. But, we are vitally concerned with the manner in which the warning was issued.

Burney did not say unequivocally

that smoking causes cancer. He only said that "evidence implicates" tobacco. It was a similarly worded statement that touched off the cranberry scare. Secretary of Health, Education and Welfare Flemming warned that a chemical used on portions of this year's cranberry crop had caused cancer in rats. He admitted that it was not known whether it would affect humans in the same way. His announcement, however, damaged the cranberry industry to a great degree.

The government has a responsibility to protect the people at all times. It has an equal obligation to safeguard industry and business. It has performed this function successfully many times in the past. One must observe, however, that in the cranberry case and in the tobacco warning, government really has done nothing but create confusion among both the public and business.

Any government statement that may frighten the people or have an adverse affect on industry should not be issued until clear-cut facts can be offered. It should not be couched in vague terms or in such phraseology as "evidence implicates." Smoking either contributes to lung cancer, or it doesn't. So far, unassailable proof has not been offered. But, by the issuance of Burney's statement, damage has been done to a large segment of American industry.

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TIMES  
Wilson, North Carolina  
December 9, 1959

TRIBUNE  
South Haven, Michigan  
December 11, 1959

## AS WE SEE IT

### They Speak Too Soon

The recent blast of the Public Health Service on "Smoking and Lung Cancer" gives us official assurance that if we don't smoke and get lung cancer anyway - it won't be from smoking.

This is about as far as anyone can go in the light of present knowledge, yet, in the effort to make tobacco appear the culprit, this Government report drags out tired old statistics that were presented to the public years ago, yet admits that experimental evidence does not support the theory of smoking as a cause of lung cancer.

The Public Health review also admits that we still don't know the effects of air pollution and occupational exposures and that the tobacco theory does not explain differences in lung cancer incidence rates.

Dr. C.C. Little, scientific director of the Tobacco Industry Research Committee, has spent 50 years in cancer research, notes that the report gives little or no attention to new evidence of recent months that:

"1. Finds that people described as the world's heaviest cigarette smokers have low lung cancer death rates compared with people who smoke less but have been long exposed to urban air pollution.

"2. Shows that direct inhalation of tobacco smoke by laboratory animals over long periods of time has not resulted

in causing lung cancer in these animals.

"3. Reveals that human lung tissues undergo changes, considered suspicious by some, that are found among both young and old, non-smokers and smokers, while lung tissues 'may be perfectly normal in heavy smokers'.

"4. Confirms the long-established but little-publicized fact that lung cancer occurs more frequently in people who have a medical history of previous serious lung ailments, such as tuberculosis, pneumonia and influenza, indicating a relationship of possible significance."

It will be recalled that the commotion over lung cancer and smoking arose with the discovery that laboratory animals developed skin cancer after being painted with tobacco "tars". Certainly, the failure of smoke inhalation tests is more significant in view of the fact that people smoke tobacco rather than using it as a cosmetic.

All in all, the Public Health review may be criticized for undue reliance on the published opinions of those who have been long committed to the theory that smoking is the principal cause of lung cancer.

On balance, most thoughtful people, we believe, will go along with Dr. Little's summation that "we are only at the threshold of understanding the breadth and depth of the lung cancer problem".

## WARDS OF GOVERNMENT

Certainly the government cannot ban cigarette smoking. We read that it is not likely to happen, since for the present the government has no authority to move against cigarettes for any effect they may have on health. This is what Ovid A. Martin, Associated Press writer has to say.

The statement is the result of the last government release on the association of cigarette smoking and lung cancer. To begin with there has never been established any definite proof of the cause of cancer, lung cancer or any type. When this is established the American people will be given the information.

The government takes many contrary positions. The income of the cranberry raisers was wiped out with one swoop when the government issued the recall of all cranberries from the grocery shelf. This was the most drastic exercise of authority we have witnessed to date. The poisonous weed killer has been definitely established. And it has been estimated that if you eat a ton of cranberries sprayed with the weed killer, cancer could develop as it has in rats.

So out go the cranberries, then back they come, supposedly with all the poison sprayed berries eliminated. Well, think what a job the government has if it tries to take from us all the harmful things of life.

There are so many that are harmful when taken in excess that few will be left. In fact you could expect the government to eliminate all fats in the diet, saying fats cause cholesterol. Then out could go sweets, because candy is said to be one of the major reasons for decay in children's teeth.

You see how absurd it all is, this matter of control. If the government is to control the area is unlimited. But is it the concern of government? Government should inform, it should advise and then adult people are supposed to have the intelligence to act for their best interest.

If the government is to do our thinking for us, we have come to a dreary time in our lives. There is a Department of Health, Education and Welfare. It has a place and an important one. But the administrators should never lose sight of the fact that

Americans are mature people. They do not like being regulated.

When tobacco is proven to cause lung cancer, this should be told the people. All definite conclusions should be given. But speculation should not enter into the picture. It is too serious. For anything taken to excess is harmful.

We still put our confidence in the good common sense of the American people, after they know the facts. Moderate is the answer, not regulation.

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"3. Reveals that human lung tissues undergo changes, considered suspicious by some, that are found among both young and old, non-smokers and smokers, while lung tissues 'may be perfectly normal in heavy smokers'.

"4. Confirms the long-established but little-publicized fact that lung cancer occurs more frequently in people who have a medical history of previous serious lung ailments, such as tuberculosis, pneumonia and influenza, indicating a relationship of possible significance."

It will be recalled that the commotion over lung cancer and smoking arose with the discovery that laboratory animals developed skin cancer after being painted with tobacco "tars". Certainly, the failure of smoke inhalation tests is more significant in view of the fact that people smoke tobacco rather than using it as a cosmetic.

All in all, the Public Health review may be criticized for undue reliance on the published opinions of those who have been long committed to the theory that smoking is the principal cause of lung cancer.

On balance, most thoughtful people, we believe, will go along with Dr. Little's summation that "we are only at the threshold of understanding the breadth and depth of the lung cancer problem".

## WARDS OF GOVERNMENT

Certainly the government cannot ban cigarette smoking. We read that it is not likely to happen, since for the present the government has no authority to move against cigarettes for any effect they may have on health. This is what Ovid A. Martin, Associated Press writer has to say.

The statement is the result of the last government release on the association of cigarette smoking and lung cancer. To begin with there has never been established any definite proof of the cause of cancer, lung cancer or any type. When this is established the American people will be given the information.

The government takes many contrary positions. The income of the cranberry raisers was wiped out with one swoop when the government issued the recall of all cranberries from the grocery shelf. This was the most drastic exercise of authority we have witnessed to date. The poisonous weed killer has been definitely established. And it has been estimated that if you eat a ton of cranberries sprayed with the weed killer, cancer could develop as it has in rats.

So out go the cranberries, then back they come, supposedly with all the poison sprayed berries eliminated. Well, think what a job the government has if it tries to take from us all the harmful things of life.

There are so many that are harmful when taken in excess that few will be left. In fact you could expect the government to eliminate all fats in the diet, saying fats cause cholesterol. Then out could go sweets, because candy is said to be one of the major reasons for decay in children's teeth.

You see how absurd it all is, this matter of control. If the government is to control the area is unlimited. But is it the concern of government? Government should inform, it should advise and then adult people are supposed to have the intelligence to act for their best interest.

If the government is to do our thinking for us, we have come to a dreary time in our lives. There is a Department of Health, Education and Welfare. It has a place and an important one. But the administrators should never lose sight of the fact that

Americans are mature people. They do not like being regulated.

When tobacco is proven to cause lung cancer, this should be told the people. All definite conclusions should be given. But speculation should not enter into the picture. It is too serious. For anything taken to excess is harmful.

We still put our confidence in the good common sense of the American people, after they know the facts. Moderate is the answer, not regulation.

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## On Hitting the Nail

Surgeon General Burney, by his paper in a recent issue of the *Journal* of the American Medical Association, has put the authority of the United States Public Health Service behind those medical researchers who blame the smoking habit for the astonishing incidence of lung cancer in American males. The weight of all existing evidence, he says, supports the hypothesis that smoking, and particularly cigarette smoking, is "the principal etiological factor."

At the same time the Surgeon General acknowledges that there has as yet been no experimental confirmation of the hypothesis. That is to say the experimenters have not up to now succeeded in producing malignant lung tumors in laboratory animals by exposing them to tobacco tars or to cigarette smoke. The evidence, therefore, remains largely statistical, but it cannot be denied that the statistics themselves are impressive and frightening. The mortalities are lowest among persons who do not smoke at all, highest among heavy smokers. The probabilities of lung cancer among cigarette smokers are three times greater than among pipe smokers, seven times greater than among cigar smokers. The reasons for this curious disparity remain in the realm of conjecture, but the most plausible conjecture is that deep inhalation "is associated almost entirely with cigarette smoking."

Even so, there are many aspects of the lung cancer phenomenon that remain deeply mysterious. One of them is the fact that the death rate has steadily risen as the death rate from tuberculosis has declined. The Surgeon General cites an English investigator who concluded that many who now die of lung cancer might, had they been born a century earlier, have died of consumption, and that predisposing genetical factors are somehow involved. At any rate, since even non-smokers do occasionally develop lung cancers, it is clear that smoking is not the only factor. Among the other strongly suspected causes is the steadily increasing pollution of the atmosphere by various industrial gases, such as smoke, the exhaust from motor vehicles and the bituminous substances used in road construction and paving.

Even more mysterious, in view of all presumed factors, is why lung cancer should now be five times commoner among men than among women, although until about a generation ago the incidence by sex was pretty much the same. But Dr. Burney, citing a study published last year, asserts that there is now "conclusive evidence that non-smoking women have about the same lung cancer death rate as non-smoking men."

As for "filter" cigarettes, which now constitute about half the national consumption, they apparently afford no real protection. Some of the tar comes through anyhow and the paper itself or the manufacturer's additives also may contain carcinogenic substances. Nevertheless Dr. Burney admits that it is at least theoretically

POST TIMES HERALD

Washington, D.C.

December 6, 1959

REFLECTOR

Greenville, North Carolina

December 1, 1959

## Should Back Up Their Words On Smoking

Tobacco regions of the South are now getting some idea of how the cranberry regions of the North and West felt when the Department of Health, Welfare and Education made its cranberry-cancer announcement a couple of weeks ago.

This time tobacco and smoking are the targets of the strong warning by the Public Health Service that asserts evidence implicates smoking as the main cause of the rising rate of lung cancer.

The so-called "new" information on which the announcement was based has been contested by the tobacco industry which naturally does not have a disinterested viewpoint on the matter. And so far the Public Health Service has not made public this "new" information which certainly it should do. If, on the other hand, the assertions have been made on the basis of old information which already has been available, the Health Service in all fairness to the industry and to the public should frankly say so.

Reaction to the announcement by the Public Health Service was immediately reflected in falling prices of major tobacco stocks on the stock market. Further reaction probably will be shown in cigarette sales in the future.

That the announcement by the Public Health Service is damaging to the tobacco industry—from the grower to the manufacturer—there can be no doubt. And certainly the industry is well within its rights to demand that the government agency responsible for the announcement supply the proof to back up its conclusions. If no such proof exists, then this government agency has done a grave injustice to the tobacco industry.

The people of North Carolina—where the tobacco industry is the most important in the entire economy—cannot afford to remain aloof from the situation. In the long run it could have a dramatic effect on the economy of the entire state, both in manufacturing and in agriculture. In the interest of the state as a whole, government officials as well as leaders in the tobacco industry should join in the demand that the Public Health Service back up its statements or back down from them.

possible to treat tobacco "so as to eliminate the hazard of cancer." Since, notwithstanding all the warnings, few inveterate smokers are likely to abandon the habit, it seems to us that the Tobacco Research Committee, which has been so busily challenging Dr. Burney's statements, might well divert more of its effort toward discovering and perfecting such a treatment.

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Since the big fuss over the supposed-to-be cancer causing cranberries, much more has been said about the matter of smoking and the growth of lung cancer. Not much new has been added, except in the article by Dr. Burney in which he referred to some new experiments tending to support the lies that smoking of cigarettes brings on lung cancer. Positive proof is yet lacking as to the link between smoking and cancer.

As of now, Americans are enjoying the greatest longevity in the history of the country, and possibly in the world. We are doing so in spite of the hazards of cranberries, cigarettes, polluted urban air, etc. Medical science is making it possible for us to live longer, healthier lives. So there is not likely to be much more worry on the part of smokers over the latest cancer

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## TIMES

Toledo, Ohio  
November 30, 1959

### More Of The Same?

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Recognition of this probability is hinted in the almost apologetic explanation by Surgeon General Burney that by law the Public Health Service must tell the medical profession and the public about anything affecting public health. The gist of his warning was that the weight of evidence implicates smoking as the main cause of the rising rate of lung cancer. He said it was based partly on new evidence. One set of eyebrows lifted immediately.

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Human nature being what it is, it also is to be suspected that the warning will gain nothing in influence by treading so closely on the heels of the cranberry furor.

## STATE TIMES

Baton Rouge, Louisiana  
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## HERALD BANNER

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He said scientific research has pointed to air pollution—principally smog and auto exhaust fumes—as a probable, though lesser, cause of lung cancer. Filter tips so far developed, he went on, do not do a good enough job of straining tars suspected as cancer producers.

Director of the Tobacco Industry Research Committee, Dr. C. C. Little of New York, commented that most of the points in General Burney's article were not new. Dr. Little said they were "first advanced some years ago in statistical studies that admittedly are not supported by experimental evidence."

But aside from any agreement or disagreement with the surgeon general's pronouncement, it does lend the color of official and authoritative approval to the claim that cigaret smoking is the "main" factor in lung cancer. At that, it merely sets the stage for a big argument between the anti-cigaret people and the pollution theorists as to which is worse.

As a layman with no pretense of medical knowledge, the writer would think that, first of all, it would be a good idea to find out whether and how much the diagnosis of lung cancer has changed in the last few years. Is more of it being found because modern diagnosis has pinned down a disease that might have been diagnosed as something else for generations? How many heart victims were buried as victims of acute indigestion or apoplexy before diagnostic procedures were improved?

In any case, cigaret consumption—no pun intended—has gone up by leaps and bounds since the lung-cancer theory was sprung on the public. That carries its own commentary.



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# Cigaret-Cancer Warning Goes Up In Smoke Here

## They Don't Scare Easily

By ED HENSLEY  
[News Staff Writer]

Cigaret smokers, like cranberry gourmets, don't scare easily!

The latest warning of the U.S. Public Health Service implicating smoking as the main cause of the rising rate of lung cancer has been taken with a carload of grains of salt by cigaret addicts here, a Man-on-the-Street survey by the News indicated today.

A pretty red-haired bar maid, Evelyn Reimold, 624 NE 5th Ave., expressed her feelings this way:

"Doctors smoke, why shouldn't I?"

"They're still eating cranberries," she added, referring to the recent cranberry cancer scare.

"I like filter tips better," she said.

R. S. Tichenor, 63, 370 SE 2nd St., who has smoked since he was 17 years old, straddled the fence on the cancer scare issue.

"Cigarets haven't hurt me, but they haven't done me any good," he said.

"These warnings have about convinced me I ought to quit smoking. That's if I can," he smiled.

"Yeah, I think I'll try to quit," he added, lighting a cigaret as he talked.

### HE'S NOT SCARED

Burly Wallace Dutton, 1300 Rd. 84, a truck driver, looking as healthy as Charles Atlas, is going to keep right on inhaling a couple of packs of fags a day.

"I feel great. Why should I give up cigarettes?"

Dutton said he first acquired the habit when he had to hide behind a barn so "ma wouldn't catch me and tar me you know where."

Statuesque Vera Gray, 6100 SW 41st Pl., a hair coloring technician, was one of the few questioned who has been "convinced" cigarettes do cause lung cancer.

"I'm convinced," she said. "I'm thinking seriously about quitting."

Vera said she smoked filter tip cigarettes because she was led to believe they cut down on the danger of lung cancer.

Cancer or no cancer, Thomas Booth, 108 SE 19th St., a taxi driver, will continue to smoke cigarettes.

"These warnings definitely have not changed my opinion on smoking," he said. "I've been smoking for 35 years and it hasn't affected my health."

"I'm through being worried about the whole deal," John Jamess, 2311 SW 43rd Way, declared. He smokes two and one-half packs of cigarettes a day to relieve the monotony of his job in a downtown tavern.

"I started out smoking filter tip cigarettes because I couldn't stand them. I thought this would cut down on the number I smoked a day.

"Now, I'm used to filter tips and I smoke just as much as I ever did."

The public has spoken. Say, pal, can I bum a smoke?

"I was breathing when I first puffed on a cigaret. I'm still breathing. Why should I worry?" chuckled husky Stanley Keeler, 435 1/2 S Atlantic Bldg., a visitor here from Winston-Salem, N.C.

"I think they're trying to sabotage our best industry," the North Carolinian joked.

Mrs. Elizabeth Barbour, 1621 NE 44th St., Pompano Beach, a housewife, who heard of the latest in a series of cigaret cancer warnings over the radio last night, summed up her feelings this way:

"The warning doesn't affect me in the least. I'll smoke until I die."

She added she realized filter tip cigarettes do not reduce the hazard of lung cancer.



EVELYN REIMOLD  
... why shouldn't I?



WALLACE DUTTON  
... I used to hide



VERA GRAY  
... I am convinced



R. S. TICHENOR  
... about convinced

NEWS  
Ft. Lauderdale, Florida  
November 27, 1959

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Dr. Hockett's statement on Dr. Auerbach's paper, simultaneously released in Dallas and New York, appeared in most stories.

THE DALLAS MORNING NEWS

Dallas, Texas

December 6, 1959

## Cancer Link Challenged By Tobacco Committee

Evidence presented here Friday that smoking causes pre-cancerous changes in lung tissue — as well as lung cancer — was immediately challenged by the Tobacco Industry Research Committee.

Dr. Robert C. Hockett of New York, who has had a scientific exhibit for the tobacco committee at the American Medical Association meeting here, issued his statement on the heels of the new report given to AMA by Dr. Oscar Auerbach of East Orange, N.J.

Dr. Hockett said: "These same observations, first publicized by Dr. Auerbach in 1956, have not

since been accepted by many other pathologists doing the same type of work and frequently studying many more lungs.

"Recent contradictions to the Auerbach findings make clear three points: First, cell changes found in human lungs occur in young or old, smokers and non-smokers. They are not limited to smokers.

"Second, lungs of heavy smokers may show no signs of such changes, so smoking does not necessarily lead to these changes.

"Third, many pathologists differ from Dr. Auerbach as to what is meant by a pre-cancerous condition."

NEW YORK WORLD-TELEGRAM & SUN

New York, New York

December 4, 1959

## MDs Report New Cancer Smoking Link

United Press International.

DALLAS, Dec. 4.—A team of medical researchers reported today it had found new evidence linking cigaret smoking to the prevalence of lung cancer.

Cigaretts are not only a major cause of the cancer itself, but also a factor leading to lung conditions favorable for the development of cancer, the report said.

The researchers, headed by Dr. Oscar Auerbach, chief of laboratory service at the Veterans Hospital in East Orange, N. J., and associate professor of pathology at New York Medical College, based their report on tissue samples taken from 402 men who died at the hospital.

63 Had Cancer.

Of that number, 63 died of lung cancer and the remainder of other causes.

Dr. Auerbach's report was said to be the first medical evidence in which tissue samples were studied to show a link between lung cancer and cigaret smoking.

The report was delivered at today's session of the American Medical Assn.'s 13th annual clinical meeting.

A five-year study showed that the prevalence of lung cancer, and of the conditions favorable for its development, were linked "almost completely" to the number of cigarettes smoked, according to the report.

### Proportion Noted.

Kinds and quantities of damage to the tissues lining the bronchi—tree-like tubes in which lung cancers grow—are in mathematical proportion to the number of cigarettes smoked, Dr. Auerbach said.

"These anatomical observations seem to us to indicate that cigaret smoking is today a major factor in the causation of lung cancer in men," he said. "This is in complete agreement with evidence previously obtained from extensive epidemiological studies." Epidemiology is the study of epidemic diseases.

Dr. Auerbach and his associates studied nearly 20,000 separate tissue samples. Nearest relatives of the 63 shown by the autopsy to have died of lung cancer said that all were smokers.

### Industry Dissents, Cites Other Studies

The Tobacco Industry Research Committee, a group representing cigaret manufacturers, issued a statement in New York disputing the Auerbach findings.

"These same observations first publicized by Dr. Auerbach in 1956 have not since been accepted by many other pathologists doing the same type of work and frequently studying many more lungs," said Dr. Robert C. Hockett, associate scientific director of the committee.

Citing several scientific studies to bear out his assertions, Dr. Hockett said that "cell changes found in human lungs occur in young and old, smokers and non-smokers."

"Lungs of heavy smokers may show no signs of such changes," he added, "so smoking does not necessarily lead to these changes."

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Cigaretts are not only a major cause of the cancer itself, but also a factor leading to lung conditions favorable for the development of cancer, the report said.

The researchers, headed by Dr. Oscar Auerbach, chief of laboratory service at the Veterans Hospital in East Orange, N. J., and associate professor of pathology at New York Medical College, based their report on tissue samples taken from 402 men who died at the hospital.

63 Had Cancer.

Of that number, 63 died of lung cancer and the remainder of other causes.

Dr. Auerbach's report was said to be the first medical evidence in which tissue samples were studied to show a link between lung cancer and cigaret smoking.

The report was delivered at today's session of the American Medical Assn.'s 13th annual clinical meeting.

A five-year study showed that the prevalence of lung cancer, and of the conditions favorable for its development, were linked "almost completely" to the number of cigarettes smoked, according to the report.

### Proportion Noted.

Kinds and quantities of damage to the tissues lining the bronchi—tree-like tubes in which lung cancers grow—are in mathematical proportion to the number of cigarettes smoked, Dr. Auerbach said.

"These anatomical observations seem to us to indicate that cigaret smoking is today a major factor in the causation of lung cancer in men," he said. "This is in complete agreement with evidence previously obtained from extensive epidemiological studies." Epidemiology is the study of epidemic diseases.

Dr. Auerbach and his associates studied nearly 20,000 separate tissue samples. Nearest relatives of the 63 shown by the autopsy to have died of lung cancer said that all were smokers.

### Industry Dissents, Cites Other Studies

The Tobacco Industry Research Committee, a group representing cigaret manufacturers, issued a statement in New York disputing the Auerbach findings.

"These same observations first publicized by Dr. Auerbach in 1956 have not since been accepted by many other pathologists doing the same type of work and frequently studying many more lungs," said Dr. Robert C. Hockett, associate scientific director of the committee.

Citing several scientific studies to bear out his assertions, Dr. Hockett said that "cell changes found in human lungs occur in young and old, smokers and non-smokers."

"Lungs of heavy smokers may show no signs of such changes," he added, "so smoking does not necessarily lead to these changes."



TIME  
December 4, 1959

## Smoking & Cancer (Contd.)

From painstaking ten-minute to half-hour microscopic examinations of each of 19,797 exquisitely thin slivers of tissue from human lungs, medical researchers reported last week that they had found the strongest anatomical evidence that heavy cigarette smoking is a potent cause of lung cancer. At the A.M.A.'s Dallas meeting, Dr. Oscar Auerbach of East Orange, N.J. told how he and a distinguished colleague, Dr. Arthur Purdy Stout (retired professor of pathology at Columbia University's College of Physicians and Surgeons), had examined the magnified tissue slides, cell by cell. Working with them were two statisticians, Dr. E. Cuyler

Hammond and Lawrence Garhinkel, both of the American Cancer Society.

Virtually all previous evidence linking cigarettes with lung cancer has been based on epidemiological studies—retrospective checks on whether victims had been heavy smokers and prospective checks on whether many heavy smokers eventually died of the disease. Wanted, said critics of these studies, was anatomical evidence showing the gradual development of cancer in smokers' lungs. Dr. Auerbach's previous reports (1955 and 1957) on this development had been challenged on technical grounds. This time, his four-man team was determined to plug every conceivable research loophole.

**Slicing the Tree.** The pathologists removed the whole breathing apparatus ("tracheobronchial tree") from the bodies of 402 men who died in Veterans Administration Hospital in East Orange and in eleven New York hospitals (mainly in nonindustrial towns to reduce bias that might result from air pollution). It turned out that 63 of the men had died of lung cancer and 339 from other causes, but the pathologists did not know this until after they had finished their findings. Each "tree" was cut into 208 portions and embedded in paraffin. Fifty-five of these portions, chosen for microscopic study, were then sliced three microns thick.

The pathologists were looking for changes in the cells, along a spectrum from normal through slightly abnormal to precancerous and finally cancerous. There were many abnormalities that the pathologists rated as probably too minor to be significant; also, many patients had died of pneumonia or other lung diseases. Even including these cases, the pathologists found atypical cells in only 3.8% of slides from nonsmokers and 10.9% of those from occasional cigarette smokers.

**Dormant Danger.** But even moderate regular smoking went with a startling rise in the chart for atypical cells: for men who smoked less than half a pack daily, it soared to 90.6% of the slides. In the half-pack to one-pack bracket, it was 97%; for one to two packs, 99.3%; more than two packs, 99.6%; and in lung cancer victims, 99.7%.

For the various stages of progression toward overt cancer, the graphs showed a similar increase with heavier smoking. Cancer-type cells lying dormant but presumably capable of erupting into fatal disease were not found in any nonsmokers or occasional smokers. But they occurred in .3% of slides in the group smoking less than half a pack daily; .8% in the half-pack-to-a-pack group; 4.3% in the one-to-two-packs group; and 11.4% of slides from men smoking more than two packs.

If challengers of the link between smoking and cancer want (as they say) evidence based on people instead of statistics, this seems to be it.

LOS ANGELES TIMES

Los Angeles, California

December 5, 1959

# CHANGES IN LUNGS OF SMOKERS CITED

DALLAS, Tex., Dec. 4 (AP) — A Veterans Administration scientist today said tissue studies of 238 men who smoked more than a half pack of cigarettes daily showed cell changes which "probably represent a change toward cancer."

The Tobacco Research Committee immediately challenged the statements by Dr. Oscar Auerbach, an associate professor at New York Medical College and a staff member of the East Orange, N.J., VA hospital.

Dr. Robert C. Hockett of the tobacco committee said "these same observations first publicized by Dr. Auerbach in 1956 have not since been accepted by many other pathologists doing the same type of work and frequently studying many more lungs."

### Reports to AMA

Auerbach's report was made at the annual clinical session of the American Medical Assn. meeting here.

He said lung cancer and other conditions which lead to it "depend almost completely on the number of cigarettes smoked."

Tests were made on nearly

20,000 pieces of lung tissue from 402 men who died.

All the 63 who died of lung cancer were smokers, 60 of them using cigarettes, the report stated.

Of the 55 who did not smoke or were light smokers, few changes in lung cells were seen by Dr. Auerbach and a staff including Dr. Arthur Purdy Stout of Columbia University and Dr. E. Cuyler Hammond of the American Cancer Society.

Dr. Hockett of the tobacco committee disagreed, saying "recent contradictions to the Auerbach findings make three clear points:

"First, cell changes found in human lungs occur in young or old, smokers and nonsmokers. They are not limited to smokers.

"Second, lungs of heavy smokers may show no signs of such changes, so smoking does not necessarily lead to these changes.

"Third, many pathologists differ from Dr. Auerbach as to what is meant by a 'precancerous' condition or by 'cancer-in-situ' (change in lining of the lung which has not penetrated into the lung)."

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THE WASHINGTON DAILY NEWS  
Washington, D.C.

## Belief: Million Students Face Death by Lung Cancer Some Day Experts Urge 'Don't Smoke' Drive

By JOHN TROAN  
Scripps-Howard Science Writer

ATLANTIC CITY, Oct. 20—More than a million U. S. school children are doomed to die of lung cancer in later life "if present trends continue," the American Public Health Association was warned here today.

The figure, reflecting the rising toll of lung cancer, was cited by a nine-man committee which urged the association to spark a nationwide "don't smoke" campaign — "especially among young people."

The American Cancer Society is gearing up to launch such a drive in high schools around Thanksgiving . . . but the committee recommended a broader campaign involving "Federal, state and local health authorities" as well.

### EVIDENCE

The committee stated flatly that "scientific evidence has established cigaret smoking to be a major causative factor" in lung cancer.

But this claim was challenged by Dr. Robert C. Hockett, a New York chemist. He is associate director of the Tobacco Industry Research Committee.

Dr. Hockett said the committee statement "goes considerably beyond" what is justified by "really reliable

scientific information." He insisted nobody had yet proved smoking actually causes lung cancer.

Dr. Hockett argued it would be "dangerous" for the American Public Health Association, to endorse an anti-smoking drive because this would kill off the "careful, objective, analytical thinking that is still needed" in lung-cancer research.

### DISAGREES

But the committee chairman, Dr. Lester Breslow of the California Health Department, disagreed. He said it has been "well established" that cigaret smoking is one of the chief causes of lung cancer.

Contending there is "also danger in not taking a position soon enough," Dr. Breslow indicated an anti-smoking campaign supported by the association could save some of the million school children destined to die of lung cancer "before they reach the age of 70" unless current trends are reversed.

The association's policy-making "governing council" is expected to vote Thursday on just what stand the health group should take on the "don't smoke" issue.

### APEAL

Meanwhile, Dr. Roger S. Mitchell of the University of Colorado called on the tobacco industry "to admit the hazard" of cigaret smoking "and try to do something to eliminate" it.

He described as "wishful thinking" the suggestion of industry spokesmen that smokers might really be "different from non-smokers" and that the lung cancer may be linked to this mysterious difference.

In a talk last night, Dr. Mitchell said studies have shown cigaets are "one of the causes" of lung cancer.

Furthermore, he said, "prolonged cigaret smoking shortens average life expectancy by at least five years," "increases the risk of hardening of the arteries and chronic lung obstruction," probably "aggravates stomach ulcers, shortens the breath" and "may impair physical performance even in young people."

HERALD  
Titusville, Pennsylvania  
October 23, 1959

## Urge Campaign Against Smoking by Children

ATLANTIC CITY, N.J. (AP)—The American Public Health Assn. estimated Thursday that more than a million American school children are presently doomed to die of lung cancer. It urged a campaign to discourage them from smoking cigarettes.

"Excessive smoking is a major factor in the disease, and public health officials of the United States and many other countries have pointed out the relationship between cigaret smoking and lung cancer," said the APHA in a resolution to its governing council.

With more than 13,500 members the association is the largest U.S. organization of public health specialists.

The resolution said lung cancer, if present trends continue, will claim the lives "of more than one million present school children in

this country before they reach the age of 70 years."

It urged a broad program of education to prevent cigarette smoking by young people. The American Cancer Society already has begun such programs in schools.

Lung cancer kills more than 25,000 Americans a year now.

In Washington, a spokesman for the tobacco industry called the resolution "obviously the result of another effort by the antismoking group to get other backing for its antitobacco campaign."

The spokesman, President James P. Richards of the Tobacco Institute, Inc., said the resolution "does not claim that a causative relationship exists between smoking and lung cancer and does not mention any other factors being investigated."

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By Robert C. Toth

ATLANTIC CITY, Oct. 21.—The American Cancer Society today announced some of the results of a study aimed at finding the best way to dissuade young people from smoking.

The survey found that both boys and girls in high school answer like children when questioned about smoking, but react in adult ways to logical reasoning on the subject.

Boys, for example, tended to say they don't smoke because it costs too much, it interferes with their wind, or similar immediate reasons. They dismiss quickly the arguments that say smoking is bad in the long run, with such comments as, "I can quit by then."

### Long-Range Reasons

But the presentation that is most effective in curbing smoking argues from the long-range point of view, that more illnesses come in middle age and death comes earlier for smokers, according to Dr. Daniel Horn, program evaluation director of the Cancer Society. He reported to the American Public Health Association.

Of five possible types of presentation, this one cut the recruitment rate of smokers almost in half, from 13 to 7.7 per cent, in one school year, he said.

Girls also derided the long-range reasons for refraining from smoking, yet this approach was again most effective. It cut the recruitment rate among girls to one-third, from 6.4 to 2.1 per cent.

However, the immediate approach was equally effective with girls. That smoking reduces their "kissability" was a very meaningful argument, Dr. Horn said in an interview.

These reductions in the school smoking population "may seem small," Dr. Horn acknowledged, "yet if carried out cumulatively for four years, it would mean that about 20 per cent of our high school students who would otherwise become regular smokers by graduation time, would not do so," he reported to the association meeting.

### How It Was Worded

The wording of the most effective presentation said something like this, Dr. Horn said: "You've heard a lot of arguments about smoking cigarettes, but we have something new to say. We have just found out that the smoking of cigarettes causes lung cancer. We did not know this, but now there isn't much doubt. Here is some of the evidence . . .

"Think about it before you decide whether or not to smoke."

Besides the immediate and

long-range approaches already mentioned, three others were tried in the study. One gave both sides of the smoking-cancer controversy. Another simply told students in an authoritative way that they should not smoke. And the last tried to make the student take the "don't smoke" message home, and so play the role of an adult by making the suggestion to their parents.

A sixth group, as controls, were not "educated" in any way, except to record how many youths normally take up smoking.

### Unexpected Finding

Dr. Horn reported the following as an unexpected finding. When parents forbid children to smoke more girls take up the practice than if nothing had been said. More than that, if the parents "strongly disapprove," but let the girl herself make the decision, the chances are better that she will not begin to smoke, Dr. Horn said.

"I leave these negativistic implications to the imagination of all men who are interested in the feminine psychology," Dr. Horn commented.

The students in the study were from eleven city high schools and five Catholic high schools in Portland, Ore., and five high schools in the urban areas, just outside that city. A total of 22,000 students were involved in the study.

In New York, a spokesman for the Tobacco Industry Research Committee, representing cigarette manufacturers, remarked that the American College of Chest Physicians' board of regents recently agreed that "a tremendous amount of research" remains to be done to "ascertain the cause of this disease (lung cancer)" and cited other theories as to its cause. The industry spokesman said he would not comment on the Cancer Society study itself, but indicated that Dr. Horn's paraphrase of the strongest deterrent argument ("We have just found out that the smoking of cigarettes causes lung cancer") disagrees with the other physicians' findings.

THE NEW YORK TIMES  
New York, New York  
October 24, 1959

## MIDDLE-AGED MEN CAUTIONED ON FAT

Heart Attacks Linked to Diet  
as Well as Overweight and  
High Blood Pressure

### SMOKING IS ALSO CITED

Health Parley Is Told That  
Cholesterol in Blood Can  
Be Cut Up to 20%

By MURRAY ILLSON

Special to The New York Times.  
ATLANTIC CITY, Oct. 23.—The middle-aged man who is lean, takes exercise, avoids too much fat in his diet, does not smoke and keeps his blood pressure down, apparently has a good chance of avoiding a heart attack.

No one actually said it that way today at the closing session of the American Public Health Association's eighty-seventh annual meeting. But it seemed to be the general conclusion of a panel of experts who discussed the prevention and control of heart disease.

Solid fat in the diet, both animal and vegetable, is the basic cause of the high toll of heart disease in middle-aged Americans men, according to Dr. Jeremiah Stamler, director of the Chicago Board of Health's Heart Disease Control Program. Dr. Stamler said that heart attacks annually strike 940 Americans out of every 100,000 and that about a third of these cases are fatal. Coronary disease, he added, accounts for a third of all deaths in men 45 to 64 years old.

### Reduction Is Possible

Middle-aged American men appear to have in their blood more cholesterol, a fatty sub-

stance, than men in some other parts of the world. Cholesterol plus such other factors as overweight and high blood pressure make for a high degree of risk in the matter of heart disease, he said.

Dr. Stamler noted that cholesterol was "amenable to alteration," meaning that it could be reduced in the blood. By proper diet, he said, the fatty substance could be reduced up to 20 per cent in most persons.

Dr. Jean Mayer of the Harvard School of Public Health said that interpreting statistical material in relation to heart disease was difficult. He noted that some studies showed a correlation between overweight and heart disease, but others did not.

However, he said that generally it would be "fair" to say that such a correlation existed, but that obesity was but one factor.

Dr. Edward D. Freis, senior clinical investigator of the Mount Alto Veterans Administration Hospital in Washington, called high blood pressure "a major cause of heart disease."

### Remedial Methods Cited

He said, however, that a recent study "leaves no doubt that methods for controlling blood pressure, at least in the less severe cases, have come of age and are available to any physician who cares to use them."

Dr. E. Cuyler Hammond, director of the Statistical Research Center of the American Cancer Society, spoke on smoking in relation to heart disease. He said he looked on the present evidence as follows:

"We are dealing with a poison—nicotine—which is known to have an acute effect upon the heart and circulatory system. People who partake of a mixture of this and other poisons, including carbon monoxide, have a higher death rate from coronary artery disease than do abstainers. The death rate increases with the dosage."

"From this," he asserted, "one might well conclude that cigarette smoking increases the risk of death from coronary artery disease. I would not bet my life on the hypothesis that such a conclusion is incorrect."



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### Reduction Is Possible

Middle-aged American men appear to have in their blood more cholesterol, a fatty sub-

stance, than men in some other parts of the world. Cholesterol plus such other factors as overweight and high blood pressure make for a high degree of risk in the matter of heart disease, he said.

Dr. Stamler noted that cholesterol was "amenable to alteration," meaning that it could be reduced in the blood. By proper diet, he said, the fatty substance could be reduced up to 20 per cent in most persons.

Dr. Jean Mayer of the Harvard School of Public Health said that interpreting statistical material in relation to heart disease was difficult. He noted that some studies showed a correlation between overweight and heart disease, but others did not.

However, he said that generally it would be "fair" to say that such a correlation existed, but that obesity was but one factor.

Dr. Edward D. Freis, senior clinical investigator of the Mount Alto Veterans Administration Hospital in Washington, called high blood pressure "a major cause of heart disease."

### Remedial Methods Cited

He said, however, that a recent study "leaves no doubt that methods for controlling blood pressure, at least in the less severe cases, have come of age and are available to any physician who cares to use them."

Dr. E. Cuyler Hammond, director of the Statistical Research Center of the American Cancer Society, spoke on smoking in relation to heart disease. He said he looked on the present evidence as follows:

"We are dealing with a poison—nicotine—which is known to have an acute effect upon the heart and circulatory system. People who partake of a mixture of this and other poisons, including carbon monoxide, have a higher death rate from coronary artery disease than do abstainers. The death rate increases with the dosage."

"From this," he asserted, "one might well conclude that cigarette smoking increases the risk of death from coronary artery disease. I would not bet my life on the hypothesis that such a conclusion is incorrect."

The statement on lung cancer by the American College of Chest Physicians was carried by the Associated Press.

1003543515

NEWS CALL BULLETIN  
San Francisco, California  
October 17, 1959

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## Chest Physicians Warn of Rise In Lung Cancer

By JIM SEAYER

The American College of Chest Physicians Friday warned of the "disturbing increase" in lung cancer and cautioned against identifying any single cause—such as cigaret smoking.

Official word from the college, observing its 25th anniversary in Albuquerque, was issued by Dr. Seymour Farber of San Francisco, college president, during a regionally televised report.

Farber's statement, approved earlier by the college board of regents at Western Skies, followed a debate on cigaret smoking and lung cancer.

### Disturbing Proportions

Farber said the lung cancer rate has reached "disturbing proportions" and it is mandatory "every effort be made to establish causative factors that may be responsible for lung cancer."

But, he noted, while many theories have been advanced, including involvement of cigaret smoking, noxious industrial fumes and other respiratory irritants, "it is the consensus of the board of regents that further work must be carried out before any single agent or agents can be definitely indicated."

Farber said, "We can, however, report that as a result of intensive research, new methods have been developed to assist the physician in early diagnosis of cancer of the lung."

The physician called early diagnosis "our greatest weapon in combating cancer of the lung," adding that "a frequent checkup by your physician, which must include X-rays of the chest, is highly commended."

### Sometimes Delayed

Dr. Andrew Banyal of Marquette University, noted swift diagnosis is sometimes delayed



LUNG CANCER is discussed by Dr. A. G. Macleod, left, scientific co-ordinator for Upjohn Co., and Dr. Seymour Farber, right, San Francisco, president of the American College of Physicians, during a televised report in Albuquerque Friday night. Dr. Farber presented the official ACCP statement on smoking and lung cancer.

because patients may first experience symptoms associated with other ailments: cough, wheezing and spitting of blood.

Dr. Albert Andrews, University of Illinois, demonstrated how a bronchoscope tube aids diagnosis of lung cancer by permitting a look into the diseased areas.

Other eminent physicians helped point out how a doctor can learn if the patient has lung cancer through cytology (cell study); X-rays which reveal "warning shadows" of cancer. Dr. Banyal noted cancer can masquerade by simulating symptoms of other diseases: the cough, chest pain, short breath.

As for treatment, the physicians noted a complete lung can be removed and the patient usually may lead a normal life, but a check must be made in advance to be sure one lung is sufficient.

### Other Participants

Other physicians participating in the program included: Dr. Leo Rigler, professor of radiology, University of Cali-

fornia; Dr. William Adams, University of Chicago; Dr. Ulrich Luft, Lovelace Foundation, Albuquerque; Dr. Rodger MacQuigg, Albuquerque; Dr. George Meneely, Vanderbilt University, Tenn.; Dr. M. Jay Flipse, Miami University, Fla.; Dr. Robert Cartwright, Albuquerque; Dr. Michael Shimkin, National Cancer Institute, Md., and Dr. L. Henry Garland, Stanford University.

The physicians will close their scientific sessions at Western Skies this afternoon. A banquet will be staged at 8 p.m. and dancing will follow at 10 a.m. All-day tours will be made to Santa Fe, Taos and Acoma Sunday before the doctors leave for home.

1003543516



Stories on Mr. Richards' year-end statement.

Radio Reports, Inc.  
December 16, 1959

1003543517

NBC News at 11:00 P.M. over WRCA (N.Y.):

BOB WILSON: "Americans smoke more than anybody in the world and it's an expensive habit. The industry says that 455 billion cigarettes have been smoked in this country this year. The cost, \$6,800,000,000. That's \$800,000,000 more than we spent on tobacco products in 1957."

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He said 1959 production of American cigarettes was running close to 500,000,000,000 to cover exports and shipments to armed forces overseas.

"The future outlook," Richards said, "indicates a continued high rate of annual gain. One industry estimate is that by 1960 U. S. smokers will be consuming 527,000,000,000 cigarettes and that by 1968 the figure will reach 690,000,000,000."

Production of cigars and cigarillos in 1958, Richards said, has increased about 350,000,000 units this year, to 6,900,000,000, while the output of smoking and chewing tobacco and snuff has declined slightly

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NEWS

Paris, Texas

November 29, 1959

## Tobacco Boosts Defense Morale

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Top tobacco men in the Department of Agriculture, the publication says, periodically update and review plans to assure availability and distribution of tobacco should military mobilization occur again. Based on problems and experiences of previous conflicts, their plans are tailored to current conditions and kept in a constant state of readiness, according to Tobacco News, publication of The Tobacco Institute.

Behind this planning, says Tobacco News, is the fact that "historians of all major conflicts in the last century are filled with vivid testimony to the value of tobacco as a morale booster to fighting men and civilian workers alike."

One little-known story told how thousands of small packages containing four cigarettes each appeared mysteriously in the Philippine Islands during the dark days of Japanese occupation. On each waterproof package was printed the American and Philippine flags and the message: "I shall return." The signature: "Douglas MacArthur Commander-in-Chief, Southwest Pacific Theatre."

This was the sign the war-shat-

tered native had been waiting for. They increased their guerrilla activity, and after the Philippines were reclaimed the full story became known.

The idea had originated with the Office of War Information in 1942, and millions of cigarettes were dropped or landed secretly before MacArthur arrived to fulfill the promise which the tiny packages had kept before the Filipinos.

Another story related how a special American-produced chewing tobacco called "Native Twist," and carried for barter by every allied flyer based in Australia, became a lifesaver for downed allied airmen. It also was an established currency among the Australian natives, many of whom used it in their custom of buying tribal wives.

DAILY NEWS

New York, New York

December 16, 1959

### Tobacco Outlook

Tobacco Institute says \$80 million in capital outlay will go into new and improved tobacco manufacturing, processing and research facilities in 1960 and 1961.

THE NEW YORK TIMES

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December 16, 1959

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An additional \$80 million is so far planned for similar improvements in 1960 and 1961, a survey by the institute showed.

Research expansion accounted for more than \$8 million of the capital outlays.

THE WALL STREET JOURNAL

New York, New York

December 16, 1959

### Tobacco Industry Capital Plans

NEW YORK—The tobacco industry in the United States plans to spend some \$80 million in capital outlay during 1960 and 1961, according to a Tobacco Institute, Inc., survey. During the past nine years, the industry invested \$314 million in manufacturing, processing and research facilities, the trade association reported. More than half of this total, \$164 million, went for new machinery. Expenditures on research accounted for \$8 million.

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THE WALL STREET JOURNAL

New York, New York

December 16, 1959

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1003543518D



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NEWS

Paris, Texas

November 29, 1959

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Behind this planning, says Tobacco News, is the fact that "historians of all major conflicts in the last century are filled with vivid testimony to the value of tobacco as a morale booster to fighting men and civilian workers alike."

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This was the sign the war-shat-

tered native had been waiting for. They increased their guerrilla activity, and after the Philippines were reclaimed the full story became known.

The idea had originated with the Office of War Information in 1942, and millions of cigarettes were dropped or landed secretly before MacArthur arrived to fulfill the promise which the tiny packages had kept before the Filipinos.

Another story related how a special American-produced chewing tobacco called "Native Twist," and carried for barter by every allied flyer based in Australia, became a lifesaver for downed allied airmen. It also was an established currency among the Australian natives, many of whom used it in their custom of buying tribal wives.

DAILY NEWS

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THE JOURNAL OF COMMERCE  
New York, New York  
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## Tobacco Cos. Set to Spend \$80 Million

*Special to Journal of Commerce*

WASHINGTON.—U. S. tobacco industry plans so far call for expenditures of \$80 million over the next two years to build new or improve existing manufacturing, processing and research facilities, according to James P. Richards, president of the Tobacco Institute, Inc.

Similar capital expenditures by the industry during the past nine years totaled \$314 million, according to a survey conducted by the institute.

### \$8 Million For Research

Expansion of research facilities accounted for more than \$8 million of the total outlay.

Also included in the improvement and expansion program to date is an item of more than \$164 million for new machinery, representing more than half of the total expenditures.

Buildings constructed by leading manufacturers of cigarets, chewing and smoking tobacco and snuff, in addition to factories, included new leaf stemming and re-drying facilities, storage warehouses and office spaces.

MIRROR

Altoona, Pennsylvania  
October 19, 1959

### Yes, It's Necessary.

**T**OBACCO, SOMETIMES referred to as a weed, now wants to share in all this popularity and publicity, especially since it is taxed highest of many products, as well as used by a good many people.

From the Tobacco Institute, which publishes a news magazine, comes a story stating that tobacco has helped win wars for it is a "fighting man's" real need. Authority for the value of tobacco is the United States Department of Agriculture which has just announced that it plans to assure tobacco supplies to fighting forces in any future war.

"The histories of all major conflicts in the last century are filled

with vivid testimony to the value of tobacco as a morale booster to fighting men and civilian workers alike," says the Tobacco News item.

In fact, the cigaret helped win the war in the Philippines for the armed forces received packages of water-tight cigarets using the "I shall return" slogan of General MacArthur, and this spurred the forces to greater action.

The story tells of tobacco being used for barter and for currency. Gen. Washington, as head of the troops, appealed, "If you can't send money, send tobacco." Gen. Pershing wrote from France in 1917, "You ask what I need to win the war. I answer tobacco as much as bullets." And finally President Franklin D. Roosevelt in 1942 put tobacco way up in the ranks of necessary products by declaring tobacco as essential a crop as food and fiber.

So it is an ancient and honorable fashion to light up, or chew tobacco, whichever you desire. This tobacco brings in a lot of revenue for Uncle Sam. Remember, half the cost of every cigaret package is tax.

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Dr. Hockett spoke at the Tobacco Chemists' Research Conference and also was interviewed for the NBC radio program "Monitor."

Radio Reports, Inc., December 12, 1959

1003543520

Hockett Discusses Smoking and Lung Cancer

Monitor, at 1:40 PM over WRCA (N.Y.) and NBC Network:

ANNOUNCER: "Monitor is presenting a special series of reports on cancer, and the countless controversies which arise whenever open discussion of this disease is conducted."

"For the next report in this series, here is our Monitor reporter."

MCGRAW: "This is Walter McGraw with another chapter in the Monitor report on controversies current in the field of cancer research."

"In our last chapter, we heard why the American Public Health Association recently passed a resolution urging a campaign to prevent cigarette smoking because it was felt that it was a major factor in causing lung cancer."

"For the other side of this argument, we talked to Doctor Robert C. Hockett, associate scientific director of the Tobacco Industry Research Committee."

"We asked him if he agreed that cigarette smoking did cause lung cancer, and he told us:"

HOCKETT: "The evidence on this particular point is rather confused. We know the diagnosis has improved as consciousness of this disease has increased. Therefore, the degree to which it has actually increased to incidence perhaps isn't altogether known. But some of these studies did suggest that there was a statistical association between the use of tobacco and the frequency of this disease, lung cancer. This, of course, then raised the question, then, whether this reflects a causal relationship, whether the use of tobacco is really responsible for the disease, either directly or indirectly, or whether the association is accidental or incidental or meaningless."

MCGRAW: "And what is the position held by the Tobacco Industry Research Committee?"

HOCKETT: "Well, of course, I believe the committee feels that no causal relationship can ever be demonstrated merely by statistics. Therefore, the people who set up the committee felt that a program of experimental and clinical research would be necessary to find out whether these statistical relationships really have any meaning."

MCGRAW: "And have you come up with any answers yet?"

HOCKETT: "Well, we've made a great many efforts to get farther into this problem. For one thing, a number of studies have been sponsored in which animals are induced to inhale tobacco smoke to see what inhalation would do to their lungs, and none of these studies have ever produced a lung cancer in the lungs of an experimental animal. You've probably read of other kinds of experiments where smoke condensates were painted on the skins of animals. We attach much less importance to this kind of study because this is not the tissue in which we are interested, and because, of course, there are great differences among various species of animals and the way they respond to substances that are painted on the skin."

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MCGRAW: "To smoke or not to smoke. Here is a place where you literally 'pays your money and takes your choice.'"

Rockett Discusses Smoking and Lung Cancer  
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Radio Reports, Inc., December 12, 1959

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Monitor, at 12:40 PM over WRCA (N.Y.) and the NBC Network:

ANNOUNCER: "The relationship of cigarette smoking to lung cancer will be our next specific field of inquiry as we switch again to our Monitor reporter."

MCGRAW: "This is Walter McGraw with a second in a series of Monitor reports on the current controversies in cancer research. Probably no area in this field has fostered more discussion than the matter of cigarette smoking."

"This fight came to another climax recently when the American Public Health Association passed a resolution which said that since it has been established that excessive cigarette smoking is a major factor in lung cancer, the public health officials in the United States should campaign to prevent cigarette smoking especially by young people."

"For details on the resolution, we talked to Dr. Berwyn Mattison, executive director of the American Public Health Association, who told us:"

MATTISON: "More than 25,000 people a year are killed by lung cancer in the United States. At the present rates, about a million of our current school children will, some time during their life, suffer lung cancer if the present pattern continues, and the reason that we are particularly interested in getting the message to the school children is that they are the ones who have the longest possible exposure to this particular hazard."

MCGRAW: "Just how much proof is there that tobacco causes lung cancer?"

MATTISON: "I want to point out that no one claims that cigarette smoking is the only cause of lung cancer, but that there has been an increasing amount of lung cancer coincident with an increasing amount of cigarette smoking. The death rate has increased about 43 times in the first half of this century. During that same period there has been a very marked increase of cigarette smoking. Perhaps the most impressive fact is that there have been cancer producing agents isolated from tobacco smoke. Some of the end products of combustion of tobacco, when applied to experimental animals, will actually produce cancer repeatedly."

MCGRAW: "I believe an answer to your argument is that while skin cancer is caused in mice by inducing tobacco carbons and so forth, this is not indicative that a man is a mouse."

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(more)



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**MATTISON:** "Well, I would hope that he is not a mouse, but we know that history of smoking is associated with pre-cancerous as well as cancerous condition."

**MCGRAW:** "And the last argument, I think, that is usually brought up that there are more smokers than nonsmokers, ergo, naturally, more smokers will die of any disease."

**MATTISON:** "We have an adequate number of nonsmokers to compare with smokers, and the difference between them is very, very great so far as the occurrence of lung cancer is concerned."

**MCGRAW:** "Another point of view in the next chapter of our Monitor report. Until then, this is Walter McGraw returning you to Radio Central."

LOUISVILLE COURIER-JOURNAL  
Louisville, Kentucky  
October 30, 1959

## Chance Of Finding One Answer To Effect Of Smoking Held Small

### Industry-Group Official Speaks

By JOE REISTER

The Courier-Journal Bureau

Lexington, Ky., Oct. 29—The problem of determining whether smoking is harmful to people "is tremendously complicated and the chance of finding a single answer is small."

So said Dr. Robert C. Hockett, associate scientific director of the Tobacco Industry Research Committee, in an address Thursday night at the Tobacco Chemists' Research Conference here.

The committee was formed in 1954 to determine whether excessive smoking was harmful to the human body. The committee is composed of leading growers and manufacturers of tobacco products.

In 1954, the American Cancer Society published statistics "showing an association between excessive cigarette smok-

ing and an apparent increase in the incidence of lung cancer in a population of men between 50 and 70," Hockett said.

#### Named Advisory Board

Subsequently, he said, the industry committee appointed a scientific advisory board "consisting of scientists of national reputation who were not connected with the tobacco industry . . . to work toward the further investigation of the claimed guilt of tobacco . . ."

Hockett told the tobacco research chemists that the industry committee and the advisory board "believe in the creation and maintenance of a balanced mental attitude toward this whole problem."

#### Says Attitude Criticized

"We do not believe in, nor do we approve of, propaganda attempting to indicate that the situation has been solved, that the problem has been taken care of, that we know the answer . . ."

"Therefore, the T. I. R. C. says, 'Let's be perfectly sure of what we say, and let's be perfectly sure of what we advocate—of the soundness of it—before we attempt to convince the public of any guilt or lack of guilt or, in fact, of any other human habit.'"

Declaring that "this attitude has been criticized by some as being obstructive," the speaker asserted:

"It is much better to proceed accurately and slowly to results that will last, than it is to proceed rapidly and sensationally to premature conclusions and part truths."

Dr. Hockett spoke at a dinner-meeting at the Lafayette Hotel. Earlier Thursday, chemists attending the conference participated in technical sessions in the Student Union Building on the University of Kentucky campus. The conference will continue through Friday afternoon.

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Dr. Steincrohn previously has written columns dealing with tobacco.

## One of Our Greatest Problems

By PETER J. STEINCROHN, M.D., F.A.C.P.

What I like about your column," writes Mr. T. T. of Detroit, Mich., "is that you have the courage to state your convictions. Everybody is saying exercise is good for you—but you preach physical laziness. It is accepted in many quarters that cigarette smoking is unquestionably the cause of lung cancer—but you say you are not yet convinced. We all know that alcoholism is one of our greatest prob-

lems—but you suggest that practically everyone after the age of 40 take a cocktail or highball before dinner.

"I am sure that you receive many strenuous objections in your mail. My main reason for writing is to tell you that quite a number of us are on your side.

We like your reasonable approach—your willingness to see both sides of the problems."

"Answer—I appreciate your kind words. But I wonder if I really deserve any credit. I never liked sitting on a picket fence!

That's what many people do. They are willing to suffer privately (by keeping their thoughts to themselves); rather than jump off and make



statements that may call forth the wrath of many of their fellows.

For example, when I say that overexertion is worse for heart patients than relative inactivity, I may be going against present opinion on the subject, but why is it being courageous to say what one believes? Especially when such beliefs arise from personal experience in treating heart patients for over 30 years?

And when I suggest that alcohol in moderate amounts is an excellent medicine for the middle-aged and the elderly—I say so in spite of the fact that I recognize that chronic alcoholism is one of our most distressing problems.

It just happens that in my medical experience, I have never made a drunkard out of anyone past 40 whom I advised to take an ounce or two (no more) of liquor a day.

Thousands of patients have thanked me for this bit of advice.

It has brought comfort to angina patients, to hypertensives, to arteriosclerotics, to tension-tired business men who came home too tired to sit down to dinner.

Of course, I realize the potential dangers of chronic alcoholism; but I recognize alcohol's benefits, too.

As for smoking, Mr. T. T., I suppose you have reference to my having said something like, "I don't advise nonsmokers to begin smoking; neither do I advise all smokers to stop. For many, it is a harmless enjoyment."

I tell many people to give up tobacco, however—ulcer patients, coronary patients, many hypertensives, people with artery disease in their legs, emphysema patients, asthma and chronic bronchitis sufferers, those with Buerger-

er's disease and people with chronic coughs due to sinus disease.

Cigarettes and lung cancer? There is much evidence, but the facts are not all in—nor conclusive. When they are, I'll be the first to throw away my tobacco, and immediately send the word out through this column that you had better do likewise.

Until then, life being relatively short for all of us, I think we human beings have the right to enjoy our "harmless" pleasures until they are definitely proved to be otherwise.

People ask, "Do you yourself do as you say?" I do.

I smoke about 10 cigarettes and two or three cigars a day. When I take to my pipe, cigarettes and cigars "are out."

I take a highball before dinner about two or three times a week, and ask my wife to "remind" me to take one on the other days.

As for exercise, I continue to be "physically lazy."

Unlike you, Mr. T. T., many readers will be saying I'm an "awful man."

THE WASHINGTON STAR  
Washington, D. C.  
October 6, 1959

NEWS-FREE PRESS  
Chattanooga, Tennessee  
November 30, 1959

## How to STOP KILLING YOURSELF

By DR. PETER J. STEINCROHN



### Tobacco: Curse or Solace?

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I have said that I'd feel safer smoking a half pack of cigarettes a day than being caught in traffic for 5 or 10 minutes behind the exhaust pipes of diesel buses.

I have said (moderate smoker that I am) that I'd be the first to throw my tobacco, pipes and the rest

away as soon as I was convinced that tobacco is really the culprit. And I'd tell you right away, too.

Tobacco is bad for some (cardiacs, ulcer patients, thromboangitis patients, etc.); but it appears to be harmless for many others.

Whenever I read anything in medical literature which comes from a good source and which reinforces my thinking on the subject, naturally I tell you about it.

For example, in Scope Weekly, I have been reading of a report given by Dr. William F. Rienhoff, Jr., associate professor of surgery at the Johns Hopkins School of

Medicine. He was giving a 25-year evaluation of lung cancer, covering nearly 800 cases.

In connection with that report, Dr. Rienhoff said that he had found "not the slightest evidence" that cigarettes are more likely to cause cancer than are the air pollutants that everyone breathes—such as exhaust fumes.

CIGARETTES. BRING solace to many people and I see no reason to scare smokers to death," said Dr. Rienhoff, himself a nonsmoker.

As always, I try to prepare against the many letters I receive following such a column as this. People will be accusing me, as they often do, of being an owner of tobacco securities (which I'm not), and of being on the payroll of the tobacco companies (ditto).

But I am hopeful that many readers will continue to look at the problem coolly and objectively until we have an unequivocal answer.

1003543523

Dr. Steincrohn previously has written columns dealing with tobacco.

## One of Our Greatest Problems

By PETER J. STEINCROHN, M.D., F.A.C.P.

What I like about your column," writes Mr. T. T. of Detroit, Mich., "is that you have the courage to state your convictions. Everybody is saying exercise is good for you—but you preach physical laziness. It is accepted in many quarters that cigarette smoking is unquestionably the cause of lung cancer—but you say you are not yet convinced. We all know that alcoholism is one of our greatest prob-

lems—but you suggest that practically everyone after the age of 40 take a cocktail or highball before dinner.

"I am sure that you receive many strenuous objections in your mail. My main reason for writing is to tell you that quite a number of us are on your side.

We like your reasonable approach—your willingness to see both sides of the problems.

"Answer—I appreciate your kind words. But I wonder if I really deserve any credit. I never liked sitting on a picket fence!

That's what many people do. They are willing to suffer privately (by keeping their thoughts to themselves); rather than jump off and make



statements that may call forth the wrath of many of their fellows.

For example, when I say that overexertion is worse for heart patients than relative inactivity, I may be going against present opinion on the subject, but why is it being courageous to say what one believes? Especially when such beliefs arise from personal experience in treating heart patients for over 30 years?

And when I suggest that alcohol in moderate amounts is an excellent medicine for the middle-aged and the elderly—I say so in spite of the fact that I recognize that chronic alcoholism is one of our most distressing problems.

It just happens that in my medical experience, I have never made a drunkard out of anyone past 40 whom I advised to take an ounce or two (no more) of liquor a day.

Thousands of patients have thanked me for this bit of advice.

It has brought comfort to angina patients, to hypertensives, to arteriosclerotics, to tension-tired business men who came home too tired to sit down to dinner.

Of course, I realize the potential dangers of chronic alcoholism; but I recognize alcohol's benefits, too.

As for smoking, Mr. T. T., I suppose you have reference to my having said something like, "I don't advise nonsmokers to begin smoking; neither do I advise all smokers to stop. For many, it is a harmless enjoyment."

I tell many people to give up tobacco, however—ulcer patients, coronary patients, many hypertensives, people with artery disease in their legs, emphysema patients, asthma and chronic bronchitis sufferers, those with Buerger-

er's disease and people with chronic coughs due to sinus disease.

Cigarettes and lung cancer? There is much evidence, but the facts are not all in—nor conclusive. When they are, I'll be the first to throw away my tobacco, and immediately send the word out through this column that you had better do likewise.

Until then, life being relatively short for all of us, I think we human beings have the right to enjoy our "harmless" pleasures until they are definitely proved to be otherwise.

People ask, "Do you yourself do as you say?" I do.

I smoke about 10 cigarettes and two or three cigars a day. When I take to my pipe, cigarettes and cigars "are out."

I take a highball before dinner about two or three times a week, and ask my wife to "remind" me to take one on the other days.

As for exercise, I continue to be "physically lazy."

Unlike you, Mr. T. T., many readers will be saying I'm an "awful man."

THE WASHINGTON STAR  
Washington, D. C.  
October 6, 1959

NEWS-FREE PRESS  
Chattanooga, Tennessee  
November 30, 1959

## How to STOP KILLING YOURSELF

By DR. PETER J. STEINCROHN



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## African Statistics

# Pollution of Air Blamed in Cancer

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San Francisco, California  
November 20, 1959

NEW YORK POST  
New York, New York  
October 30, 1959

## S. African Lung Cancer Deaths Low

London, Oct. 30 (Reuters)—A leading South African doctor reports in the British Medical Journal that white South Africans—the heaviest smokers in the world—had a low lung cancer mortality rate.

Dr. Geoffrey Dean, senior honorary physician at the hospital of Port Elizabeth, said that the South African city man over the age of 35 smoked an average of 24 cigarettes a day and his country cousin over 35 an average of 23 a day.

He conceded that the death rate from lung cancer in South Africa had doubled during the last 10 years but, he added, the mortality rate was still relatively low.

He blamed the increasing lung cancer mortality rate among South African-born on "the rapid industrialization and growth of the cities during the past 10 years."

NEW YORK, Nov. 19 (UPI)—Yet another large-scale statistical study of a now familiar subject is notable because it didn't get the familiar result.

It concluded that a greatly increased atmospheric pollution over cities may be the "major factor" in the sharp rise in lung cancer deaths over the past few decades.

It is notable also because the basic statistics were the lung cancer deaths among the white population of the Union of South Africa. This population smokes more cigarettes per capita than any other in the world.

But its rate of lung cancer deaths has been and remains low when compared with the rates for the United States, the Irish Republic and Great Britain which are second, third and fourth in per capita cigarette smoking.

### DOUBLING

This inspired Dr. Geoffrey Dean of Port Elizabeth to study the well-kept South African vital statistics with the help of government statisticians. Between 1947 and 1956 the lung cancer death rate among males doubled.

Yet this was a smaller rate of increase than in the U. S. or Great Britain. Dean related this to the fact that South African urban atmospheres became increasingly polluted in that period. Those atmospheres were less polluted, however, than those of American and British cities.

Dean compared the lung cancer death rate of males born in South Africa with the rates for men who had emigrated there from Great Britain and other countries. Among men who were less than 65 years old when they died, the rate was 45 per cent higher for British emigrants than for natives or for other emigrants. Above the age of 65 there was no difference.

### EARLY POLLUTION

This indicated to Dean that the British emigrants under 65 had been subjected to the polluted atmospheres of British cities for longer periods before they moved to the relatively cleaner atmospheres of South Africa. Relying on other statistical tables, he assumed that the older men had been in South Africa much longer and so had the same risk as natives.

Still another statistical point was a comparison of lung cancer death rates in cities and in rural districts. In South Africa, the rural cigarette consumption is comparable per capita to that of the cities. Dean said and if cigarette smoking were the principal factor in lung cancer, the lung cancer death rates would be comparable.

### THE DEGREE

But they weren't. The urban rate was much larger than the rural. Dean went further. He compared the relative atmospheric pollution of South African cities and showed that generally speaking, the death rate was pegged to the degree of pollution.

In his report to the British Medical Journal, Dean said "environmental factors" had to be chiefly responsible for the increases in male lung cancer death rates. One such factor, he said, was cigarette smoking.

"However," he added, "the relatively low incidence of lung cancer generally among the heavy-smoking South African men, the higher and rapidly rising incidence in the growing cities and the high incidence in the younger age group of immigrants from Britain, suggests that the air pollution which occurs in modern industrial life—smoke, smog, traffic fumes, etc.—may be a major factor."

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"However," he added, "the relatively low incidence of lung cancer generally among the heavy-smoking South African men, the higher and rapidly rising incidence in the growing cities and the high incidence in the younger age group of immigrants from Britain, suggests that the air pollution which occurs in modern industrial life—smoke, smog, traffic fumes, etc.—may be a major factor."

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1003543524 A

# New Study of Cancer Easier on Cigarettes

By Robert C. Toth

South Africans are the heaviest smokers in the world. Yet they have less lung cancer than the lighter-smoking Britons. This has impressed many doctors as a paradox in view of the cancer-smoking statistical links that have been reported in recent years. Looking into it, a South African doctor has done a scientific study that indicts air pollution—smoke, smog, auto exhaust—as a major factor in the rising lung-cancer rate in his country, Britain, "and presumably elsewhere."

The doctor, Geoffrey Dean, suggests that the air pollutants may be more important than cigarette smoking in causing cancer.

## Other Factors Suggested

Commenting on Dr. Dean's study, which appeared in "The British Medical Journal," the American Cancer Society's chief statistician, Dr. E. Cuyler Hammond, said it was "an excellent paper, well done."

Dr. Hammond contended that a survey of South Africans would show smokers get lung cancer more often than non-smokers. But he acknowledged that other factors—such as climate, occupation and air pollution—must be involved in the paradox of heavy smokers having relatively low cancer rates, and vice versa.

In his research, Dr. Dean compared the cancer rates among native-born South African white men with those of British white men who migrated to South Africa. The British immigrants were presumably exposed to more air pollutants because they had lived in the heavily industrialized British Isles.

He found 44 per cent more cancer deaths among the British immigrants than among the native-born.

This difference in rate could not be explained away by a difference in cigarette consumption, he said. The immigrants smoked the same amount as the native-born (about twenty-four cigarettes a day).

Yet the lung cancer rate in South Africa has doubled between 1946 and 1957, Dr. Dean said. He reasoned that if air pollution was a major factor, it would show up in a comparison of rural and city dwellers, the rural farmers presumably having been breathing cleaner air.

The most highly industrialized city in South Africa is Dur-

ban. Dr. Dean found the cancer rate among British immigrants in Durban to be twice that of British immigrants living in the rural areas. Moreover, it was five times that of native-born South Africans in rural areas.

Dr. Dean concluded that lung cancer is caused both by genetic and environmental factors, with environment "chiefly responsible for the high incidence of the disease. There is evidence from other studies that cigarette smoking is such (an environmental) factor."

"However, the relatively low incidence of lung cancer generally among the heavy-smoking South African men, the higher and rapidly rising incidence in the growing cities, and the high incidence in the younger age group of immigrants from Britain, found in the present study, suggest that the air pollution which occurs in modern industrial life—smoke, smog, traffic fumes, etc.—may be a major factor responsible for the alarming increase of lung cancer in South Africa and Britain, and presumably elsewhere," he said.

United States smokers are much like the South Africans. They smoke more than the British, but have a lower cancer rate.

1003543525



November 14, 1959

## PUBLIC HEALTH

# Smokers' Lung Cancer Low

A study of white South Africans, long recognized as the heaviest cigarette smokers in the world, establishes they have a lower lung cancer mortality than others who smoke less.

THE GROUP of persons long recognized as the heaviest cigarette smokers in the world have been found to have a significantly lower incidence of lung cancer than the British, whose incidence is extremely high.

The white South African has long been the highest consumer of packaged cigarettes in the world, Dr. Geoffrey Dean of Provincial Hospital, Port Elizabeth, South Africa, says.

He found the average white South African male 35 years of age or older smoked approximately 24 cigarettes per day. This includes not only city but rural smokers, he reports in the *British Medical Journal* (Oct. 31).

Dr. Dean compared this group's mortality rate from lung cancer with that of a group of British immigrants. He found that deaths due to lung cancer among British immigrants between the ages of 45 and 64 were 44% higher than among white native-born South African males of the same age range.

The investigator then asked himself if the greater mortality among the immigrants could be due to differences in the tobaccos used in cigarettes made in each country. He discovered that the tobaccos used in cigarettes in both countries are flu-cured just as they are in the United States. Those differences that were found between the

cigarettes were not considered by Dr. Dean as significant in causing lung cancer.

Furthermore, many of those immigrants who died from lung cancer came to South Africa in their twenties, and those who smoked cigarettes before emigrating would have smoked British cigarettes for only a few years, he reasoned.

There were, however, great differences between the tobaccos used in cigarettes manufactured in other European countries before the last war. Consequently, if differences in the tobacco were important, one might expect a considerable difference in the mortality rate from lung cancer between South African men and immigrants from countries other than Great Britain. Yet there is no significant difference, he says.

In fact, the cigarette smoked by the South African resembles the cigarette puffed by an American, and both experience virtually the same incidences of lung cancer which are much less than in Great Britain.

This led Dr. Dean to conclude that those immigrants who died of lung cancer before age 65 were exposed to the cause or causes before they left Britain.

Despite the cheerful news for South African smokers, the study also revealed that while deaths due to lung cancer are considerably lower than in Britain, the death rate from this disease has doubled

in South Africa during the ten-year period between 1947-1956. This increase is unlikely to be due to improved diagnostic facilities, but rather, he suggests, it appears to be a genuine increase.

This increase has followed the rapid industrialization and growth of cities with in the past 40 years, he noted. Both the country and city dwelling white male South African smoke approximately the same amount of cigarettes. Yet, the increase in mortality is much higher in large cities than in rural areas, he points out.

For instance, the male lung cancer death rate in the city of Durban is higher than the corresponding rate in any other city in South Africa. This applies to both native-born and immigrants. Cigarette consumption in Durban is no higher than elsewhere in South Africa. Yet, during the ten-year period 1947-1956, the death rate from lung cancer among British immigrants in Durban between the ages 45 and 64 was more than five times higher than the rate among the native-born living in rural districts.

Pointing the finger of guilt at air pollution, Dr. Dean says that Durban has a hot humid climate. It has fewer sunny days in the year than the other South African cities. The smoke in Durban per cubic meter compares with districts of London, he says.

Thus he concludes that the higher incidence of lung cancer among residents in South African towns, and in Durban particularly, as compared with the incidence among residents in rural areas, would seem to be strong evidence that atmospheric pollution is an important factor. If so, it is equally likely that the higher incidence among the more recent British immigrants, may again be connected with the air they breathed before emigrating.

1003543526

Material on tobacco and health was given the author of this article.

LOS ANGELES TIMES  
Los Angeles, California  
October 20, 1959

## SMOKING DISPUTED AS CANCER CAUSE

### Tobacco Industry Claims Charges Against Cigarettes in Lung Cases Are Not Proven

This is the 15th of 16 articles on cancer, presenting a summary of current techniques in treatment and prevention of the disease.

BY HARRY NELSON, Times Medical Editor

Is smoking a factor in lung cancer, the leading cause of cancer death in men?

Yes, says the American Cancer Society.

But the tobacco industry, which has put up nearly \$3.5 million for research into tobacco and health by independent scientists, points out that the ACS assertion has not been proved and rests entirely on statistical evidence.

Therefore, it concludes the Tobacco Industry Research Committee—as well as many medical men who have no axes to grind—no one can say with scientific conviction that smoking is a causative factor in lung cancer.

#### Rapid Rise Noted

According to ACS, lung cancer incidence has increased eight-fold in the past 20 years, the most rapid rise ever reported for a non-infectious disease. Nearly 30,000 men and approximately 5,000 women will die of lung cancer this year, the society reports.

A two-pack-a-day male cigarette smoker who has been smoking for years has about 1 in 10 chances of developing lung cancer. A less than a pack a day smoker has about 1 in 36 chances of developing the disease. The odds for a non-smoker are about 1 in 270.

These ACS figures are based entirely on statistical evidence gathered in studies of the smoking habits of thousands of victims of lung cancer. They are not based on any clinical or laboratory

evidence which proved that smoking was the cause of the disease.

The statistical relationship has been strong enough, however, to prompt the surgeon general of the United States to declare: "The Public Health Service feels the weight of the evidence is increasingly pointing in one direction: that excessive smoking is one of the causative factors in lung cancer."

It has also caused the British government to launch an educational campaign warning of the danger of cigarette smoking.

#### Emphasis on Future

And here in California such evidence has been instrumental in a renewed attempt to incorporate in school curriculums an educational program on smoking.

"Educating adults in the dangers of smoking is doomed to failure," a spokesman for the Los Angeles County branch of ACS told The Times.

"The emphasis must be on the future—on the education of our children. Such a course should be a simple presentation of facts, not a condemnation. It should be taught the same way that arithmetic is taught."

Clarence Cook Little, Sc.D., scientific director of the Tobacco Industry Research Committee, has this to say:

The scientific world has long been cautious in accepting claims for a cure for cancer. We should be just as cautious today in accepting claims that a direct cause of cancer has been found.

"The statistical associations reported between excessive cigarette smoking and lung cancer have pointed out the need for greatly intensified research. They have not provided the answers—nor can any purely statistical association do so."

#### No Simple Cause

"Nonsmokers get lung cancer. The vast majority of heavy smokers never get lung cancer. Obviously, there is no simple cause and effect mechanism resulting from cigarette smoking."

Other medical men have pointed out that the epidemic like increase may be due to factors totally unrelated to cigarette consumption. These factors, they suggest, are the development of better diagnostic facilities and longevity of the population.

A Canadian researcher has found no X-ray evidence of lung cancer in northern Indians and Eskimos, almost all of whom smoke heavily. This suggests that smoking alone is not the cause of the disease.

And a Scot investigator, Dr. T. W. Lees, Law Hospital, Carlisle, Scotland, has analyzed the evidence suggesting a relationship between smoking and lung cancer and concluded that smoking is no more intimately concerned with lung cancer than the increase in banana eating, cinema going and many other habits which have grown the past 50 years.

Obviously, the tobacco industry and the American Cancer Society cannot both be right.

According to Dr. Abraham M. Lilienfeld of Johns Hopkins School of Hygiene and Public Health, a leading authority on cancer prevention, some sort of action must be taken if success in controlling lung cancer is to be achieved.

#### Action Suggested

This action, he says in a recent issue of the American Journal of Public Health, can be directed at three points: the cigarette, the smoker or the exposure of the smoker to cigarettes.

Concerning the cigarette, it may be possible to determine the cancer-causing chemical in tobacco and remove it or alter the cigarette in such a way that the cancer-causing activity is lessened.

"To achieve this objective a great deal of chemical research is in progress and perhaps in the near future this will be the major control measure," Dr. Lilienfeld says.

As for the smoker, the physician believes there are factors influencing host susceptibility to the cancer-causing activity of tobacco and this is why all heavy cigarette smokers do not develop lung cancer.

Very little is presently known about susceptibility, however. More research is needed in this area in order to learn a method for determining the susceptible state so that persons possessing it could be motivated not to take up smoking.

The third approach, trying to influence the smoking public to give up the habit and to educate teenagers not to begin smoking, also involves unknown factors. In this case the unknown factors involve human motivation.

#### Striking Feature

"The striking feature about these remarks is that even after we have decided that action should be taken in the field of preventive medicine we are faced with a lack of knowledge necessary for developing adequate control measures," Dr. Lilienfeld writes.

"Many basic problems in the field of cancer can only be solved by a more intensive public health research effort. It is not necessary to await the time when the biochemists and biophysicists have solved the 'riddle of the cancer cell' for the development of a sound, scientific program for cancer prevention and control."

1003543527

Secretary Flemming was asked about governmental "authority over tobacco" during a panel-type radio interview.

Radio Reports, Inc.  
December 13, 1959

College News Conference at 1:00 P.M. over WMAL-TV (Washington) and the ABC-TV Network:

Mr. Arthur S. Flemming, Secretary of Health, Education and Welfare, was seen on the TV screen as he was interviewed by a panel of students.

QUESTION: "Well, if the HEW more or less disapproves the use of any cancer-producing additive or product, then why haven't cigarettes been taken off of the market or why have they not received a great deal of this disapproval?"

FLEMMING: "This is a very good question and points up the relationship of the Department and particularly the Public Health Service to what is certainly a very controversial issue. I would say -- I should say first of all that we do not have an authority to take cigarettes off the market. They are not a part of the authority that is vested in the Food and Drug Administration."

QUESTION: "Who has authority over tobacco?"

FLEMMING: "Well, no one has authority to take it off the market, and I think if we stopped to analyze the situation, we can't help but realize that really we're dealing with two different types of situations. After all, if a substance is used in such a manner as to find its way into a food item, there isn't anything the consumer can do about it by himself. He goes in and buys the food item without realizing that he is possibly buying an item of food which includes a substance that may induce cancer.

"Now as far as smoking, or as far as cigarettes are concerned, no one is required by the necessities of life to purchase cigarettes. Now you asked why in effect we hadn't taken a position relative to the smoking issue. Just a few weeks ago the Surgeon General of the United States, who is the head of the Public Health Service, published in the Journal of the American Medical Association an article which I think summarized very effectively the studies that have been made in this area, some studies pointing to the fact that smoking is a factor in lung cancer, and other studies pointing in the opposite direction.

"The Public Health Service has an obligation to identify a public health issue of this kind. It has an obligation to present the facts as it sees them to the public. And then at the conclusion of this article, the Surgeon General stated his own conclusions regarding this matter. He has been attacked for his conclusions, but in my judgment he did the right thing in stating his conclusions. I think the American people should keep in mind the fact that when the Surgeon General states conclusions of that kind, they are receiving those conclusions from a man and from a service that has just one objective in life, and that is to protect the health of the American people and to prevent disease.

(more)

"Now he identified the fact that there has been a sharp incidence in lung cancer -- that is, an increase in the number of cases in relation to the population -- and he arrived at the conclusion on the basis of all of the evidence, possibly the principal contributing factor to this increase in lung cancer is smoking. I admire him for stating his conclusion, and on the basis of my own conclusions only after carefully balancing the evidence and then stating in just as frank a manner as he could his conclusions, and I feel they are entitled to a great deal of respect."

QUESTION: "Mr. Secretary, if it is proven that cancer is caused in part by cigarettes, do you feel that there should be an authority in the government which has the power to take such a harmful product off the market?"

FLEMMING: "No, as I've already indicated, I feel that the situation is quite different, because of the fact that the American people, as I've indicated, are entitled to the facts, and they're to the conclusions of a service such as the Public Health Service, based on those facts. But then it seems to me that the American people have the right to analyze the facts, analyze the conclusions of the Surgeon General, and the conclusions of others who differ from the Surgeon General, and then make their own decision as to what they are going to do."

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1003543529

Dr. Ash's claims were made at a press conference. Walter Pincus, Washington correspondent for the Durham (N.C.) Morning Herald, called Hill and Knowlton, Inc., for comment on Dr. Ash's statement that American cigarette companies were cooperating with the physician.

DURHAM MORNING HERALD  
Durham, North Carolina  
November 26, 1959

## Radioactive Leaf Report Disputed

By WALTER PINCUS  
Washington Correspondent

WASHINGTON — A mushrooming cloud of doubt has risen over a Canadian doctor's statements here on radioactivity in tobacco smoke.

Dr. Arthur Edward Michael Ash met with reporters Tuesday to unveil his new method for steaming radioactive particles from tobacco. Radioactivity in cigarette smoke, the doctor said, may be the link between lung cancer and tobacco usage.



PINCUS

In his prepared statement the doctor said, "Studies by Coghill and Hobbs of Duke University revealed that cigarette tobacco smoke contains 670 microcuries per gram, a degree of radioactivity too high for public consumption."

Contacted Wednesday, Dr. Marcus E. Hobbs of Duke called Dr. Ash's statement "not a factual report of the paper's finding."

Dr. Hobbs said, "We did not measure radioactivity at all." The 1957 study, he stated, concerned itself with potassium in tobacco leaf and found that only "half of 1 per cent of the potassium in the leaf is transferred to the smoke by normal cigarette smoking."

Hobbs said these results led to the conclusion that further study of radioactive material in cigarettes was unnecessary.

In another portion of his Tuesday statement, Dr. Ash stated "both British and American cigarette industries are cooperating in (his) research." Hill and Knowlton, public relations advisors to the Tobacco Institute Trade Assn. for U.S. Manufacturers, strongly denied

Wednesday there was any cooperation or support at all for the Ash project.

A representative of the Department of Agriculture's tobacco division, who attended Ash's Tuesday conference, said he has furnished the Agriculture Research Service a copy of the doctor's presentation for their study. The department official said he was unable to evaluate Ash's claims but said he believed Ash "singled out tobacco because he had something to sell."

Harry Guinivan of Washington Industrial Research Consultants, Inc., Dr. Ash's public relation's advisers here, said the new research group to be formed by Dr. Ash would "sell the process" of steaming tobacco to rid it of radioactivity "to cigarette manufacturers and processors."

Asked how much Dr. Ash would charge for his process, Guinivan replied, "He wants a cent a pound to lease his machine" which does the steaming, "and a million dollars to carry on his work in research."

"I don't know whether he'll get it," Guinivan added.

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HERALD  
Miami, Florida  
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Ash said there are three reasons why tobacco contains so much radioactive material. He blamed potassium and rubidium, which he called natural factors, the increased use of fertilizers and fallout from increased bomb testings.

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Durham, North Carolina  
November 25, 1959

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His studies, Dr. Ash said, had proved "conclusively" that commercial tobacco contained a high concentration of radioactive potassium.

A letter to Dr. Ash from the Imperial Tobacco Co. of Canada, however, disputed these results.



Dr. Ash's claims were made at a press conference. Walter Pincus, Washington correspondent for the Durham (N.C.) Morning Herald, called Hill and Knowlton, Inc., for comment on Dr. Ash's statement that American cigarette companies were cooperating with the physician.

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In his prepared statement the doctor said, "Studies by Coghill and Hobbs of Duke University revealed that cigarette tobacco smoke contains 670 microcuries per gram, a degree of radioactivity too high for public consumption."

Contacted Wednesday, Dr. Marcus E. Hobbs of Duke called Dr. Ash's statement "not a factual report of the paper's finding."

Dr. Hobbs said, "We did not measure radioactivity at all." The 1957 study, he stated, concerned itself with potassium in tobacco leaf and found that only "half of 1 per cent of the potassium in the leaf is transferred to the smoke by normal cigarette smoking."

Hobbs said these results led to the conclusion that further study of radioactive material in cigarettes was unnecessary.

In another portion of his Tuesday statement, Dr. Ash stated "both British and American cigarette industries are cooperating in (his) research." Hill and Knowlton, public relations advisors to the Tobacco Institute Trade Assn. for U.S. Manufacturers, strongly denied

Wednesday there was any cooperation or support at all for the Ash project.

A representative of the Department of Agriculture's tobacco division, who attended Ash's Tuesday conference, said he has furnished the Agriculture Research Service a copy of the doctor's presentation for their study. The department official said he was unable to evaluate Ash's claims but said he believed Ash "singled out tobacco because he had something to sell."

Harry Guinivan of Washington Industrial Research Consultants, Inc., Dr. Ash's public relation's advisers here, said the new research group to be formed by Dr. Ash would "sell the process" of steaming tobacco to rid it of radioactivity "to cigarette manufacturers and processors."

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LEADER TIMES

Kittanning, Pennsylvania

December 10, 1959

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Dallas, Texas

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"The National Cancer Institute spends tax money, not voluntary contributions. The Institute is a branch of the U.S. Public Health Service, which operates under the Department of Health, Education and Welfare."

"We think the community should be aware that their federal taxes are helping to support a cancer research program in a

momentous way."

The doctors said the 90 per cent figure mentioned by the sign as the percentage spent for cancer research in this country by American Cancer Society and the Cancer Institute is accurate.

They hinted that ACS is attempting to inflate its own contributions by lumping its research funds with the tax funds in arriving at that figure, however.

"We are very much in favor of anything that helps fight cancer," said the doctors, "but feel the public should be adequately informed on sources of financial support for this attack on disease."

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Purpose of last night's meeting was to acquaint the health and biology teachers with the facts obtained by the American Cancer Society research so that the information can be passed on to the pupils for their study before they have acquired smoking habit.

A report in the American Journal of Public Health states "the accumulation of scientific evidence implicating cigarette smoking as a health hazard, and particularly as the major cause of lung cancer, has led to an increased sense of responsibility among individuals and agencies concerned with public health to see that young people are made aware of these hazards before they have established smoking as a regular habit."

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TRIBUNE

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American Cancer Society through its Education committee of which Dr. Clara Cockerille is chairman.

Dr. Rosencrans said the mortality rate of cigarette smokers is 68 per cent higher than the death rate of a comparable group of men who never smoked, according to the Cancer Society study. Death rates increase with the amount of smoking, the doctor said.

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Other items of interest.

CLEVELAND PLAIN DEALER  
Cleveland, Ohio  
December 18, 1959

## Study Links Smoking, Low Masculinity

WASHINGTON (AP)—Tobacco smoking, especially heavy smoking, may be a mark of weak masculinity, a study of a group of Harvard alumni indicates.

The findings were reported yesterday by a Harvard anthropologist who said that though admittedly tentative they might eventually have a bearing on the question of the as-

sociation of smoking with lung cancer and coronary heart disease.

In a report in the technical journal Science, Dr. Carl C. Seltzer said a special anthropological study under way for more than 13 years had indicated:

That there is a significant association between the strength of something called

the "masculine component"—a body-build trait which also has characteristic personality and behavioral components — and the smoking habits of male subjects.

"More specifically," he said, "Weakness of the masculine component is significantly more frequent in smokers than in nonsmokers and significantly more frequent in heavier smokers than in nonsmokers and moderate smokers combined."

### Component Defined

Seltzer defined this masculine component as "the element of masculinity in the individual as indicated by his external morphological (bodily) features."

He indicated that a man with an abundance of the masculine component tends to be one with an athletic, he-man build. Vice versa, the chap whose build tends to be somewhat feminine is rated low in masculine component.

The scientist said the study covered 252 Harvard men. They were studied initially while they were sophomores during the period 1938-1942, and have since been followed annually by questionnaires. Smoking habits constituted only one of a number of elements in the research.

### 3 Groups Studied

Of the study group, 24.3% were found to be nonsmokers; 38% moderate smokers and the rest heavier smokers.

Seltzer, of Harvard's Peabody Museum, indicated that the findings, if confirmed, might have a bearing on the smoking-and-disease controversy for this reason:

It might be possible to set up a study to determine whether smokers and nonsmokers differ in their susceptibility to lung cancer and heart disease "because of their biological nature, apart from the element of smoking itself."

Such a study, he indicated, might then throw new light on whether smoking, of itself, contributes materially to an increase in the incidence of such diseases.

THE HERALD-NEWS  
Fontana, California  
September 26, 1959

## Pack or More Each Day

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He also said the statistical correlation between smoking and lung cancer did not mean there was a "cause-and-effect relationship."

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WHITE PLAINS  
REPUBLICAN-DISPATCH  
White Plains, New York  
October 30, 1959

Other items of interest.

CLEVELAND PLAIN DEALER  
Cleveland, Ohio  
December 18, 1959

## Study Links Smoking, Low Masculinity

WASHINGTON (AP)—Tobacco smoking, especially heavy smoking, may be a mark of weak masculinity, a study of a group of Harvard alumni indicates.

The findings were reported yesterday by a Harvard anthropologist who said that though admittedly tentative they might eventually have a bearing on the question of the as-

sociation of smoking with lung cancer and coronary heart disease.

In a report in the technical journal Science, Dr. Carl C. Seltzer said a special anthropological study under way for more than 13 years had indicated:

That there is a significant association between the strength of something called

the "masculine component"—a body-build trait which also has characteristic personality and behavioral components — and the smoking habits of male subjects.

"More specifically," he said, "Weakness of the masculine component is significantly more frequent in smokers than in nonsmokers and significantly more frequent in heavier smokers than in nonsmokers and moderate smokers combined."

### Component Defined

Seltzer defined this masculine component as "the element of masculinity in the individual as indicated by his external morphological (bodily) features."

He indicated that a man with an abundance of the masculine component tends to be one with an athletic, he-man build. Vice versa, the chap whose build tends to be somewhat feminine is rated low in masculine component.

The scientist said the study covered 252 Harvard men. They were studied initially while they were sophomores during the period 1938-1942, and have since been followed annually by questionnaires. Smoking habits constituted only one of a number of elements in the research.

### 3 Groups Studied

Of the study group, 24.3% were found to be nonsmokers; 38% moderate smokers and the rest heavier smokers.

Seltzer, of Harvard's Peabody Museum, indicated that the findings, if confirmed, might have a bearing on the smoking-and-disease controversy for this reason:

It might be possible to set up a study to determine whether smokers and nonsmokers differ in their susceptibility to lung cancer and heart disease "because of their biological nature, apart from the element of smoking itself."

Such a study, he indicated, might then throw new light on whether smoking, of itself, contributes materially to an increase in the incidence of such diseases.

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## NEW CLUE FOUND FOR LUNG CANCER

Cigarette Smoke and Smog  
Said to Impair Respiratory  
Tract Defense Ability

Cigarette smoke and air pollutants in smog may contribute to the development of lung cancer by interfering with the fluids and minute hair-like structures in the lining of the respiratory tract.

This possibility was suggested in two reports from scientists at the University of Southern California School of Medicine that appear in the November number of The Journal of the National Cancer Institute, just out.

According to the reports, natural and artificial smog and their components, as well as smoke from both filtered and nonfiltered cigarettes, affect the respiratory tract's defense mechanisms in three ways.

They slow the flow of the mucous stream, change the physical properties of the mucous and decrease the whiplike action of the fine structures called cilia.

Normal functioning of the mucous and cilia are known to prevent the accumulation of

foreign matter on the lining of the respiratory tract.

The California scientists suggest that impairment of this function by smoke and cigarette smoke may permit the abnormal retention of cancer-causing chemicals there.

### Frog Esophagus Used

Evidence that various agents can affect ciliary activity and mucous flow has been accumulating for several years. The new study was confined to the effects produced by smog and smoke from cigarettes.

The scientists used the ciliated lining of the esophagus and adjoining portions of the intestinal tract of frogs as representative of similar tissue in the respiratory tract in mammals such as man. Parallel studies on mammals permitted the relation of their findings on frogs to higher animals, they wrote.

Smog and cigarette smoke was blown over or against the tissue in plastic chambers. The action of the mucous and cilia were measured after two-second exposures to the irritants.

The first reaction was an increased flow of mucous. This was followed immediately, the scientists wrote, by a sudden drop in the flow, then a gradual return to normal function.

The second phase of the response in which mucous flow decreased and the defense mechanism was presumably impaired was observed even at minute concentrations of irritants from smog and cigarette smoke.

DURHAM MORNING HERALD  
Durham, North Carolina  
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## Air Pollution Said More Deadly Than Smoking In Cancer

CHICAGO (AP) — A man who has devoted his scientific career to a study of the causes of cancer contended Saturday that air pollution is a more important factor than cigarette smoking in the increase in lung cancer.

Dr. Wilhelm C. Hueper, chief of the Environmental Cancer Section, National Cancer Institute, Bethesda, Md., said an upsurge in lung cancer first was noted between 1900 and 1920, several years before the practice of cigarette smoking became widespread.

And he added that exposure to cancer-causing agents must occur at least 10 to 15 years before an increase in such deaths is detected statistically.

Hueper made his remarks during an interview at the annual meeting of the American Assn. for the Advancement of Science where he received the \$1,000 AAAS-Anne Franco Rosenthal Memorial Award for cancer research.

Hueper, 65, said exhaust fumes from gasoline and coal tar by-products spewed into the atmosphere by industry are the principal agents responsible for the sharp increase in lung cancer.

However, he said smoking may play a role. He said tobacco smoke contains small concentrations of cancer-causing agents and that smoke also can act as an irritant that weakens the lungs' normal defense mechanism.

He told newsmen he quit smoking 20 years ago.

Pollution from car exhausts fumes could be halted, he said, if auto makers could devise an engine that causes complete combustion of gasoline. Industrial plants, he went on, should seek to perfect a system whereby the air workers' breath would be free from vapors, gases and fumes.

U.S. NEWS & WORLD REPORTS  
Washington, D. C.  
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THE NEW YORK TIMES  
New York, New York  
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Cholesterol is a fat-like substance in the blood. It has been implicated as a cause of heart attacks. Many investigators believe there is evidence of a connection between high cholesterol levels and hardening of the arteries.

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PRESS

Asbury Park, New Jersey

December 10, 1959

## Smog and Cancer

The smog-filled skies of New Jersey's industrial areas are cause for public apprehension as new clues to lung cancer continue to unfold through medical research.

Two reports in the November issue of the *Journal of the National Cancer Institute*, based on studies made in the School of Medicine at the University of Southern California, suggest that not until the New Jersey Department of Health succeeds in ridding New Jersey of its ever-increasing smog can the public feel that its health is adequately protected.

The cancer institute reports find that smog as well as smoke from both filtered and nonfiltered cigarets affect the defenses that nature has provided in the respiratory tract of human beings to resist cancer causing chemicals.

Such chemicals interfere with the mucous fluids and hair-like structures called cilia. Tests made on frogs suggest that smog and its air pollutants constitute a serious menace to public health.

New Jersey has laws covering smog but the current standard of enforcement does not indicate that any substantial results have been obtained. Certainly the state has been more than patient in giving offending industries or the operators of open dumps time to take corrective action.

Smog alone cannot be blamed entirely for the rising incidence of lung cancer. But it cannot be tolerated for long in the face of the repeated warnings from responsible medical sources. Even if it plays only a minute part in the cancer threat it must be eradicated with all possible speed.

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DURHAM MORNING HERALD  
Durham, North Carolina  
October 24, 1959

## Cigarettes Unhurt By Insecticides

RALEIGH (AP) — A North Carolina State College study has produced results indicating that chemical and biological tobacco insect killers are not harmful to cigarette smokers.

Dr. Kenneth R. Keller, director of tobacco research at the college, said Friday the two chief insect killers used by tobacco farmers were harmless in cigarettes. Keller's announcement coincided with a new grant of \$16,738 by the National Institutes of Health, U.S. Public Health Service, to continue the study.

The interim report dealt with TDE and Endrin.

The levels of TDE found in commercial cigarette smoke are more than four times less than the seven parts per million permitted on

food by the Food and Drug Administration.

Keller said a person would have to inhale, and retain, the smoke from a pack of cigarettes a day for 250 years before he approved levels which might be considered harmful.

"Even with the best available chemical techniques," the report continued, "it has not been possible to detect even traces of Endrin from the smoke of an entire carton of cigarettes."

"Further research on chemical control has revealed that certain of the newer experimental insecticides are heat degraded during flue-curing or smoking, resulting in an insecticide-free tobacco smoke."

SAN DIEGO UNION  
San Diego, California  
November 5, 1959

## Smoking, Cancer Tie Held Unproved

Smoking as a cause of lung cancer has not been proved conclusively, a surgeon said Meyer yesterday. Dr. Charles B. Puestow, a professor of surgery at the University of Illinois, said even medical researchers are divided in opinions on a link between tobacco and lung cancer.

"If lung irritation contributes to lung cancer, automobile exhaust fumes or other air pollutants possibly



Puestow

should share the blame," Puestow said.

Puestow, a pipe smoker, was interviewed at the 13th annual Postgraduate Assembly at County Hospital. About 600 physicians and surgeons are attending the assembly, presented under the auspices of the Physicians Research Foundation of the County Hospital. It ends today.

Puestow is a member of the research committee of the American Cancer Society for the Illinois division. The ACS has linked smoking to lung cancer, but Puestow said the opinion is not unanimous among members of the research committee.

THE NEW YORK TIMES  
New York, New York  
December 8, 1959

## U.S. ASKED TO CURB TOOTHPASTE ADS

Head of Dental Association  
Outlines a Plan to Control  
'Deceptive' Claims

More government control was sought yesterday over what was described as deceptive advertising practices on television and in print by the toothpaste industry.

Dr. Paul H. Jeserich, president of the American Dental Association, disclosed here yesterday the attack formulated by the group. It calls for:

1. Legislation by Congress permitting Federal agencies to eliminate such advertising.

2. A code of fair practices to be set up with the cooperation of the Federal Trade Commission or the Food and Drug Administration.

3. Scientific proof of advertised claims. This would be submitted to the F. T. C., so that the burden of proving the items retarded or cured human ailments would be shifted from the Government to the manufacturers.

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New York, New York  
December 8, 1959

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# Ban Cigarets? Farmers Would Suffer, Government Tax Take Would Nosedive

## News Commentary

By OVID A. MARTIN

Associated Press Staff Writer

WASHINGTON — What would happen to the economy if the government banned cigarettes?

It's not likely to happen, since at present the government has no authority to move against cigarettes for any effect they may have on health.

Surgeon General LeRoy E. Burney last week warned that the weight of evidence implicates smoking as the main cause of a rising rate of lung cancer, but he has no power to ban smoking even if he favored such a move. Industry spokesmen attacked Burney's warning as a warmed-over rehash of old statistics.

But if the government did ban cigarettes, the action would have several hefty consequences. For one thing it would paralyze a seven billion dollar industry. For another, it would take a painful bite from federal, state and local tax revenues.

While taking no sides on the cancer controversy, farm officials said Wednesday a drastic ban of cigarettes would adversely affect three-quarters of a million farm families and thousands more workers now marketing, processing and selling tobacco products.

The Agriculture Department said taxes collected on tobacco products by federal, state and local governments will total \$2,700,000,000 this year. Nearly two billion dollars of this goes to the federal government alone.

THE MIAMI HERALD  
Miami, Florida  
December 3, 1959

Subsidies paid tobacco growers under federal farm programs total less than 175 million dollars since the inception of those programs in the mid-thirties. These subsidies have been small compared to those for other crops because production has been controlled more rigidly.

Tobacco manufacturers and the federal government would lose more in total dollars than would growers, who will receive an estimated \$1,100,000,000 for their tobacco this year.

Officials estimated that more than 40,000 wage earners would be thrown out of work in the industry. Their wages were estimated at more than \$160,000,000 a year. Thousands of retail tobacco stores would be affected. Heavy losses would be sustained also in useless cigarette vending machines.

A ban on cigarettes would affect an estimated 58 million smokers in this country. Officials estimate that an additional 12 million persons smoke cigars and eight million more smoke pipes or roll-your-own cigarettes.

Officials emphasized, however, that there is no legal authority for banning cigarettes or taking them off the market. Tobacco is not covered by the Food, Drug and Cosmetic Act which provided authority for recent action by the Food and Drug Commission against tainted cranberries.

The commission has seized cigarettes at times where they were represented to aid in reducing weight or to have some medical effect. But such action was based on grounds the cigarettes were sold as drugs and were mislabeled.

## A Few Kind Words for Tobacco

One of the big tobacco companies has been charged by the Federal Trade Commission with false advertising as to the superior efficacy of its filter in protecting smokers from tar and nicotine. The company insists that its advertising is true. True or false, such advertising probably does more than all the lung cancer drumbeaters in convincing the public that there is a danger in cigarettes from which it needs protection.

The tobacco companies have done all they can to offset what they believe is a fallacious propaganda that smoking may bring on dread disease. In their thesis that a connection between smoking and lung cancer has not been proven, they have recently had some support from *The Journal of the American Medical Association*. Yet day after day the millions spent on advertising by many cigarettes is put to the service of proving that there is a danger but that the filter of such-and-such a cigarette reduces it most.

Hardly any company's advertising has taken a positive position in this matter. And there is a positive position. It could, indeed, be well argued that, since Sir Walter Raleigh introduced tobacco to the world, no new discovery has given so much pleasure to man with less proven harm. Of course, there are dangers in too much smoking. The doctors are increasingly insistent on the dangers of too much eating. But, though nobody ever beat his wife or drove his car in a lethal manner because he had smoked too much, more attention seems sometimes to be directed at the dangers of smoking than at the dangers of drinking.

Man is often foolish. He does many things that he ought not

to do. But it is hard to believe that tobacco in a few centuries has come to world-wide acceptance if it has not given man a lot of pleasure in that time. And pleasure is not to be scorned in a world full of vexations and tensions. Indeed, those who sell the cigarettes, while not dismissing the possibility of danger from excess smoking, ought to be engaged in the praise of a product which has brought pleasure to simple people, has been enjoyed by many of the greatest thinkers since its introduction, and is now a source of relaxation and enjoyment by millions of far from foolish people, including probably a majority of doctors.

Perhaps this would have been a safer world if tobacco had never been discovered. That applies to alcohol, probably to pork. Recently a woman doctor in England added carbohydrates and sex to the list of things to be avoided in any desire for longevity. Certainly the automobile (regardless of the effects of its fumes on human lungs) has cut short the hopes of long life of many in our times.

We should not disregard the dangers of any of them, including tobacco. But there should be a few kind words about the pleasure in the poet's pipe, the physicist's cigarette, the poor man's smoke which tobacco has brought. And certainly the tobacco companies should be the first to praise that long and universal enjoyment and the last to try to persuade the public of the essentially dangerous qualities of tobacco: by stressing safety belts they provide along with the boat ride. In advertising, the sea and the scenery, the pleasure and the relaxation should get more emphasis than the possible storm.

NEWS & OBSERVER  
Raleigh, North Carolina  
December 16, 1959